

MEETING REGISTRATION FORM

REGISTRATION DEADLINE

The early bird registration deadline is for the 2009 Symposium is **Saturday, November 1, 2008**. For easy registration and immediate confirmation, register online at:

www.strandness-symposium.com

All registrations made after the November 1st deadline will be subject to the regular registration fees. Cancellations must be received by Monday, December 15, 2008 and are subject to a 25% administrative fee. No refunds will be given after this date. Full payment is required to confirm registration. Please fax all completed registration forms to 978-744-5029, or mail to the address listed below:

Administrare
 Attention: Strandness Vascular Symposium
 203 Washington Street, PMB 311
 Salem, Massachusetts 01970
 USA

REGISTRANT

 Name

 Institution

 Address

 City

 State

 Postal Code

 Country

 Daytime Telephone

 Email

 Dietary Restriction/Need (if applicable)

REGISTRATION TYPE

	Early Bird Fee	Regular Fee
	<i>(By Nov. 1st)</i>	<i>(After Nov. 1st)</i>

GENERAL SESSION

- | | | |
|---|-------|-------|
| <input type="checkbox"/> Physician | \$650 | \$700 |
| <input type="checkbox"/> Resident/Fellow | \$500 | \$550 |
| <input type="checkbox"/> Nurse/Technologist | \$500 | \$550 |
| <input type="checkbox"/> Industry Personnel | \$650 | \$700 |

THURSDAY PROGRAM

- | | |
|---|-------|
| <input type="checkbox"/> I will attend the Thursday Interpretation Review Course in addition to the General Session selected above. | \$150 |
| <input type="checkbox"/> I will attend ONLY the Thursday Interpretation Review Course. | \$275 |

D. EUGENE STRANDNESS JR. TRIBUTE DINNER

Tickets for this dinner are \$75 each.

- I will attend with _____ guests.
- I will not attend.

TOTAL AMOUNT DUE \$ _____

PAYMENT METHOD

Please make checks payable to Administrare, LLC.

- Check
- MasterCard
- VISA
- American Express

 Credit Card Number

 Expiration Date

 Cardholder's Name

 Signature