Sponsored by the American Academy of Medical Acupuncture® April 11–14, 2019 | Sheraton Grand Phoenix | Phoenix, Arizona

## 31st ANNUAL AAMA SYMPOSIUM REGISTRATION FORM

USE ONE REGISTRATION FORM PER ATTENDEE. (Fill out form completely. Please print information clearly.)

Full Name					
Street Address / Suite / Apartment Number (if applicable)					
City / State / Zip Code					
Telephone	Fax	Email			
<b>SYMPOSIUM REGISTRATION</b> Early Bird Registration closes on <b>JANUARY 29</b> indicated below.	9, 2019. Registrations receiv	red after that date are char	rged the higher registration fee levels	s as	
REGISTRATION CATEGORIES	REGISTRATION FEE BY JAN 29, 2019	REGISTRATION FEE BY MAR 12, 2019			TOTAL FEE
AAMA Fellow and Full Members	\$700 ea.	\$750 ea.	\$ 810 ea.	\$_	
AAMA Affiliate Members	\$800 ea.	\$850 ea.	\$ 910 ea.	\$_	
☐ Non-Member*	\$950 ea.	\$950 ea.	\$ 1,010 ea.	\$_	
☐ Medical Student, Resident, Active Military	\$500 ea.	\$550 ea.	\$ 610 ea.	\$	
*Non-Members – For non-member physicians, registration fee includes the eligible, the non-member physician must not have previously held a member physician must not have previously hel	ne cost of one year of AAMA Affiliate member pership and must otherwise meet the require	rship dues (cost \$175). To be ments for Affiliate membership.	SYMPOSIUM FEE ENCLOSED	\$_	
PRE-SYMPOSIUM WORKSHOPS (Indicate ONLY one choice below.) Workshop fee: \$295.00 each			WORKSHOP FEE ENCLOSED	\$_	
<ul> <li>I. Pediatrics – The San Jiao and Its Role</li> <li>II. Auricular Causative Approach for the D</li> <li>III. Supportive Care for Cancer Patients / E</li> <li>IV. How to Successfully Incorporate Media</li> <li>FRIDAY CELEBRATORY DINNER/ENTE</li> <li>Number of Guests at:</li> </ul>	oiagnosis and Treatment of N Butch Levy, MD cal Acupuncture into Your M	leurological Conditions / N	chis, MD  chis, MD  tion fee - this fee is for GUEST dinner only.)  \$\begin{align*}     \text{\$\text{\$}} \te		
CVI I ADIIC (Discussion assuided from to all delegates	If you wish to purchase the evicted C	Cillabria thanaia a \$40 faa \	DINNER FEE ENCLOSED	\$_	
SYLLABUS (Disc version provided free to all delegates.	if you wish to purchase the printed S		ED SVI I ADUS FEE ENGLOSED	¢	
Printed (Additional Cost: \$40.00 each)		PRINTI	ED SYLLABUS FEE ENCLOSED	<b>a</b> -	
			TOTAL FEE ENCLOSED	\$_	
DIETARY (In an effort to try to address any dietary consists  ☐ Vegetarian (lacto-ovo) ☐ Vegan ☐ Glu ☐ Allergies (nuts or others; describe)	ten-free 🔲 Lactose Intole	rant	will do its best to meet your needs.)  er		
PAYING BY CHECK? Make checks payable AAMA, 2512 Artesia Boulevard, Suite 200	e to the AAMA. Mail with	completed form and pay			
Charge my VISA MASTERCAF Name (As it appears on card. Please print.)					
Card Number				 Code	
Billing Address					
(Billing address for credit card is required if differer					
1	,				
SIGNATURE (As it appears on card.)					
Phone	EXI				

EARLY BIRD REGISTRATION CLOSES JANUARY 29, 2019, AFTER WHICH HIGHER REGULAR AND LATE FEE RATES APPLY. SEE GENERAL INFORMATION SECTION FOR DETAILS. Payment in full is required prior

**SECTION FOR DETAILS.** Payment in full is required prior to admittance and must accompany this form to qualify for advance registration fees. The final program, name badges and tickets will be available at the registration desk.

**REFUNDS AND CANCELLATIONS** Requests for refunds must be in writing and received at the Academy's office by March 22, 2019. There will be a \$75 handling fee assessed for all cancellations. NO refunds will be issued for cancellations received after March 22, 2019.

**USE ONE REGISTRATION FORM PER APPLICANT** 

**NEED INFORMATION?** 

Call 310.379.8261 voice — or fax to 310.379.8283

EMAIL - info@medicalacupuncture.org

FOR DETAILED, UP-TO-DATE EVENT INFO AND TO REGISTER ONLINE, VISIT WWW.MEDICALACUPUNCTURE.ORG

