



REGISTRATION
 Southern Region Burn Conference
 November 8-11, 2018
 Renaissance Riverview Plaza Hotel, Mobile, AL

**Return Form With
 Payment to:**
 Registration
 Southern Medical Assn.
 3500 Blue Lake Drive
 Suite 360
 Birmingham, AL 35243
 Phone: 800.423.4992
 Fax: 205.945.1830

Full Name: _____ Degree: _____

DOB: _____ Gender: _____ Specialty or Certification: _____

Practice / Institution Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email Address: _____ (REQUIRED)

✓ Mark Category	Category	On/before October 15, 2018	After October 15, 2018
<input type="checkbox"/>	Physicians	\$560*	\$600*
<input type="checkbox"/>	Nurses	\$380*	\$420*
<input type="checkbox"/>	Healthcare Professionals	\$380*	\$420*
<input type="checkbox"/>	Non-Healthcare Professionals	\$380	\$420
<input type="checkbox"/>	Military Physicians and Military Healthcare Professionals	\$195	\$195
<input type="checkbox"/>	Resident/Fellow	\$150	\$200
<input type="checkbox"/>	Medical, Nursing and Rehabilitation Students	\$75	\$125
<input type="checkbox"/>	One Day Only ___ Fri ___ Sat ___ Sun	\$225	\$225
<input type="checkbox"/>	Thursday Rehabilitation Workshop 8:00 am – 5:00 pm	\$240	\$280
<input type="checkbox"/>	Thursday Pediatric Burns Session 2:00 – 5:00 pm	\$65	\$75
<input type="checkbox"/>	Thursday Advanced Burn Provider Course 8:00am-5:00pm	\$299	\$299
<input type="checkbox"/>	Friday Lunch with Exhibitors	No Fee	No Fee
	Special Events		
<input type="checkbox"/>	Thursday Welcome to "Mobile" Reception <input type="checkbox"/> Need transportation to/from event	No Fee	No Fee
<input type="checkbox"/>	Friday 'Meet-and-Greet' Reception Location: Exhibit Hall	No Fee	No Fee
<input type="checkbox"/>	Saturday Burn Center Tour	No Fee	No Fee
<input type="checkbox"/>	Saturday Farewell Reception <input type="checkbox"/> Need transportation to/from event	No Fee	No Fee

***MOBILE host institution** – \$35 Discount available. Call SMA at 800.423.4992 ext. 620 for your discount code.

Total amount: \$ _____ Method: ___ Check (payable to SMA) ___ VISA ___ MC ___ Discover ___ AMEX

Card Number: _____ Exp Date: _____ Security Code (required): _____

Name on Card: _____

Signature: _____

Billing Address - Same as above OR: _____

Past Attendee: ___ Y ___ N How did you hear about the conference? _____

The registration fee includes sessions, syllabus, certificate of credit or attendance, breakfasts, breaks, lunch with exhibitors, tour of the burn center and social events.