

Registration Form

Full Early Bird Registration to Friday, May 31, 2024 will be \$125.00 for physicians and pharmaceutical sponsor representatives, \$75.00 for all others and \$50.00 for residents and students.

Registration after May 31, 2024 will be \$150.00 for physicians and pharmaceutical sponsor representatives, \$100.00 for all others and \$75.00 for residents and students.

Registration fee will cover meals as noted in program and the Friday Night dinner (NOTE: space is limited and will be filled on a first come/first serve basis). Registration after Friday, May 31, 2024, will not cover the Friday, June 21, Evening Dinner. No refunds for cancellation of registration will be issued after June 47, 202.

Please register by Friday, May 31, 2024. Registration and payment can be completed one of three (3) ways:

1. Online on the ACOG website - <http://www.acog.ca> and send registration fee via e-Transfer to acogsymposium@gmail.com or send in mail (cheque/money order/cash) to address noted below in item 2.

2. Complete the registration form, enclose payment (cheque/money order/cash) and mail to the address below:

Dana Bartlett
Co-ordinator, ACOG
PO Box 151
Marysvale, NL A0A 2Z0

3. Complete and scan the registration form to acogsymposium@gmail.com and send registration fee via e-Transfer to acogsymposium@gmail.com or send in mail (cheque/money order/cash) to address noted above in item 2.

As indicated above, registration fee to be included with registration. Please indicate method you will be using:

Cheque Money Order e-Transfer

One individual per form - Information for registration badge (***please print***)

Name _____

Position/Title _____

Organization _____

Address _____

Telephone () _____ Fax () _____

Email _____

Will you be attending the dinner at the Waterfront Warehouse on Friday evening, June 21, 2024 (Note space is limited -- space will be filled on a 'first come/first serve' basis?)

Yes No

If yes, please indicate entrée choice:

Lobster Chicken Vegetarian

If you would like to bring a guest(s) to the Friday evening dinner, there will be an **additional charge of \$80.00 per person**. Please indicate your intention below and include additional cost, if applicable, with your registration fee.

Will you be bringing a guest(s) to Dinner on Friday evening, June 21, 2024?

Yes No Number of Guest(s): _____

If yes, please indicate entrée choice for guest(s):

Lobster Chicken Vegetarian

Children's meals (chicken fingers & fries, small beverage and scoop of ice-cream) are available at an **additional charge of \$25.00 per child (age 12 and under)**. Please indicate your intention below and include additional cost, if applicable, with your registration fee.

Do you require a children's meal for Friday evening, June 21, 2024?

Yes No Number of Children: _____

Check, if applicable

Do you or your guest(s) have any special dietary accommodations _____

Do the child (children) have any special dietary accommodations _____

Symposium seating is limited. Please register early. Please note conference dress is casual.