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| **Maine Medical Association’s 169th Annual Session****Register Now at**  **https://www.mainemed.com/annual\_session****Or you may complete this form and return to the address below either by mail or via fax**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Credentials: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Spouse/Guest: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**REGISTRATION**

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| * **$499 Registrants**
 | * **$300 Guest (CME is not included)**
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**CHILDRENS MEALS** (UNDER AGE 12) **NO FEE**  Number of Children \_\_\_\_\_All registrations for conference include Friday Reception, all meals Saturday and Sunday. **REGISTRATION FOR GOLF AT KEBO VALLEY GOLF CLUB**

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| * **$125 – (Lisa Martin will be in contact with golf registrants with more details)**
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* Check enclosed, made payable to Maine Medical Association (mail to address below)
* Credit Card Payment. Fax to 207.622.3332 **🗖 AmEx** **🗖Visa 🗖 MC** (check one)

**CC#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CCV\_\_\_\_\_\_\_ Exp.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Cardholder Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Billing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Card Zip Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Total Due: \_\_\_\_\_\_\_\_\_\_\_** * Yoga Class (limited to 18) Saturday, September 10th, 6-7 a.m. Destination Health, No fee. *(Bring your own mat)*

 Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* Hike, Saturday, September 10th, 2 pm. Meet at Bar Harbor Club. No fee.

*All requests for cancellations must be received in writing. If a written request of cancellation is received at the MMA office prior to August 31st, the registration fee less a 30.00 administration fee, will be refunded after the meeting. Refund requests received after August 31st will not be honored.****Mail to: Maine Medical Association******P.O. Box 190, Manchester, ME 04351******Lisa Martin, 207-480-4201 or lmartin@mainemed.com*** |  |
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