

# ISMICS 2015 Meeting Registration Form

**REGISTER ONLINE** at [www.ISMICS.org](http://www.ISMICS.org)

## ATTENDEE INFORMATION *(please print)*

|   |                             |                    |
|---|-----------------------------|--------------------|
| <b>Name</b>   | <b>Hospital/Affiliation</b> |                    |
| <b>Address</b>  | <b>City</b>                 |                    |
| <b>State/Province</b>                                   | <b>Country</b>              | <b>Postal Code</b> |
| <b>Phone</b>  | <b>Fax</b>                  |                    |
| <b>Email Address</b> <i>(required for confirmation)</i> |                             |                    |

## REGISTRATION FEES

All Fees Quoted & Payable In USD

### COMPLETE PROGRAM

#### ISMICS MASTERS DAY & ANNUAL MEETING

|                            | EARLY BIRD<br><i>Thru<br/>3 April</i> | REGULAR<br><i>Beginning<br/>4 April</i> | ONSITE<br><i>From<br/>22 May</i> | <u>Amount</u> |
|----------------------------|---------------------------------------|---|----------------------------------|---------------|
| Member*                    | \$895                                 | \$1095                                  | \$1195                           |               |
| Non-Member Physician       | \$1195                                | \$1395                                  | \$1495                           |               |
| Allied Health Professional | \$595                                 | \$695                                   | \$695                            |               |
| Presenting Resident **     | \$395                                 | \$495                                   | \$495                            |               |
| Non Presenting Resident    | \$495                                 | \$595                                   | \$595                            |               |

#### ANNUAL MEETING ONLY- CARDIAC AND THORACIC TRACKS *(select track below)*

|                            |        |        |        |  |
|----------------------------|--------|--------|--------|--|
| Member*                    | \$595  | \$795  | \$895  |  |
| Non-Member Physician       | \$795  | \$995  | \$1095 |  |
| Allied Health Professional | \$395  | \$495  | \$495  |  |
| Presenting Resident **     | \$195  | \$295  | \$295  |  |
| Non Presenting Resident    | \$295  | \$395  | \$395  |  |
| Guest*** (Name _____)      | \$150  | \$150  | \$150  |  |
| Non-Exhibiting Industry    | \$1200 | \$1300 | \$1500 |  |

#### ISMICS MASTERS DAY ONLY

ISMICS Masters Day is Wednesday 3 June

|                             |       |       |       |  |
|-----------------------------|-------|-------|-------|--|
| Masters Day – Member*       | \$495 | \$695 | \$795 |  |
| Masters Day – Non-Member    | \$595 | \$795 | \$895 |  |
| Masters Day – Allied Health | \$295 | \$395 | \$395 |  |
| Masters Day – Resident      | \$295 | \$395 | \$395 |  |

**TOTAL ENCLOSED** \$ \_\_\_\_\_

\* Member fees will be honored for those ISMICS members in good standing with membership dues current.

\*\* Annual Meeting fees (not including ISMICS Masters Day) is reduced for presenting residents & TSRA Members (all formats including full-length, mini, video and poster).

\*\*\* Guest Badge- Wednesday/Thursday Exhibit Hall Receptions & Friday Reception - Badge will be required for admittance

Please Select One **ANNUAL MEETING EDUCATIONAL TRACK** ☐ CARDIAC or ☐ THORACIC

### ISMICS MASTERS DAY COURSE SELECTIONS

#### One Morning Course Topics

- ☐ Hybrid Procedures
- ☐ Minimally Invasive Treatment of Aortic Disease
- ☐ Transcatheter Mitral
- ☐ Simulation-Based Training Program (Residents & Fellows)
- ☐ Thoracic (Morning Session)

#### One Afternoon Course Topics

- ☐ Minimally Invasive and Robotic Mitral Valve
- ☐ Arrhythmia
- ☐ Surgical/Interventional Treatment of Heart Failure
- ☐ Simulation-Based Training Program (Residents & Fellows)
- ☐ Thoracic (Afternoon Session)

## PAYMENT

Credit cards are preferred. ISMICS accepts American Express, MasterCard or Visa. Registration fees may also be paid via check/money orders drawn on US banks only, payable in US dollars to ISMICS.



**Name** (As it appears on Card) \_\_\_\_\_ **Security Code:** \_\_\_\_\_

(See card images above) **CREDIT CARD NUMBER:** \_\_\_\_\_

**EXPIRATION DATE:** \_\_\_\_ / \_\_\_\_

**BILLING ADDRESS** \_\_\_\_\_

(If not the same as address listed above)

**SIGNATURE:** \_\_\_\_\_

I authorize ISMICS to charge my credit card the above fees.

**FAX THIS FORM:** 1-978-524-0461. If paying by check or money order, please **MAIL THIS FORM:**

ISMICS, Annual Scientific Meeting, 500 Cummings Center, Suite 4550, Beverly, MA 01915 USA.

## CANCELLATIONS

All requests for cancellations must be in writing and received at the ISMICS Administrative Offices on or before 20 May 2015. The registration fee, less a \$50 processing fee, will be refunded after the meeting. No refunds are available for partial attendance. No refunds will be issued for cancellations received after 20 May 2015.