

ISMICS 2017 Meeting Registration Form

REGISTER ONLINE at www.ISMICS.org

ATTENDEE INFORMATION *(please print)*

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

REGISTRATION FEES

All Fees Quoted & Payable In USD

COMPLETE PROGRAM

ISMICS MASTERS DAY & ANNUAL MEETING

	EARLY BIRD <i>Thru 7 April</i>	REGULAR <i>Beginning 8 April</i>	ONSITE <i>From 5 June</i>	Amount
Member*	\$945	\$1145	\$1245	_____
Non-Member Physician	\$1245	\$1445	\$1545	_____
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*	\$620	\$820	\$920	_____
Non-Member Physician	\$820	\$1020	\$1120	_____
Allied Health Professional	\$395	\$495	\$495	_____
Presenting Resident **	\$195	\$295	\$295	_____
Non Presenting Resident	\$295	\$395	\$395	_____
Guest*** <i>(Name _____)</i>	\$150	\$150	\$150	_____
Non-Exhibiting Industry	\$1200	\$1300	\$1500	_____

ISMICS MASTERS DAY ONLY

ISMICS Masters Day is Wednesday 7 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	_____

SOCIAL EVENTS

Social Event Fee (All Programs)	\$50	\$50	\$50	_____
---------------------------------	------	------	------	-------

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

- Minimally Invasive and Endovascular Thoracic Aortic Surgery
- Minimally Invasive, Robotic and Innovative Coronary Surgery
- Minimally Invasive and Transcatheter Aortic Valve Interventions

One Afternoon Course Topics

- Minimally Invasive and Transcatheter Mitral Valve Interventions
- Minimally Invasive Surgical Approaches to Heart Failure
- Minimally Invasive Surgical Approaches to Atrial Fibrillation

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 1 June 2016. 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 1 June 2017.