

Advance Registration Form

(not valid after April 20, 2012)



44TH Mohs College
Annual Meeting
 MAY 3-6, 2012 — CHICAGO, IL
 FAIRMONT MILLENNIUM PARK

Page 1 of 2

Now You Can Register Online With A Credit Card!

Go to: <http://www.mohscollege.org/annualmeeting/registration>

Early-bird registration deadline: February 20, 2012 @ 11:59 pm PDT

\$50 additional fee for registrations received after this date through April 20, 2012

Please print clearly. A separate form must be completed for **each** registrant.

Name: _____

Address: _____

City: _____ State/Region: _____ Zip Code: _____ Country: _____

Phone: _____ Fax: _____

Email: _____

Indicate how you would like your first name to appear on your badge: _____

Special Accommodations

Yes, I (the registrant) require an auxiliary aid or service identified in the Americans with Disabilities Act.

Explain: _____

Yes, I (the registrant) require specially-prepared food at group functions (please circle): Vegetarian Kosher

Other: _____

Registration Categories And Fees

(NOTE: The registration fee does not include admission to Morning Mini-sessions. Registrants must sign up for these sessions separately and pay the extra fee for each Morning Mini.)

	Early-Bird Registration On or before February 20	Advanced Registration February 21-April 20
<input type="checkbox"/> ACMS Life Members	FREE	FREE
<input type="checkbox"/> ACMS Fellow & Associate Members & Associate Applicants	\$500.00	\$550.00
<input type="checkbox"/> Current Fellows-in-Training (A letter of verification from current fellowship director must accompany the registration form.)	\$125.00	\$175.00
<input type="checkbox"/> Dermatology Residents (A letter of verification from a member of the ACMS must accompany the registration form.)	\$125.00	\$175.00
<input type="checkbox"/> Non-Member Physicians (A letter of sponsorship from a member of the ACMS must accompany the registration form.)	\$1,150.00	\$1,200.00
<input type="checkbox"/> Mohs Surgical Assistants (A letter of sponsorship from a member of the ACMS must accompany the registration form.)	\$250.00	\$300.00
<input type="checkbox"/> Guest – Name: _____ (Fee includes admission to exhibit hall and Welcome Reception. No admittance to scientific sessions.)	\$200.00	\$250.00

Special Courses

ACMS Diagnostic Quality Control Examination (DQC) - ACMS Members only

DQC Exam for current Mohs Fellows-in-Training

Registration Fee \$ _____

\$50.00 \$ _____

No Charge \$ -0-

Page 1 Total \$ _____



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Registrant's Name: _____

Morning Mini-Sessions

\$55.00/Each Session

Thursday, May 3, 2012 – 7:00 to 8:30 am

Indicate preferred course number and alternate choice(s):

- 103.1 Facial Reconstruction
- 103.2 Reconstructive Challenges: Lip & Ear
- 103.3 Unusual Cutaneous Carcinomas: On the Road with Thelma and Louise
- 103.4 Immunohistochemistry
- 103.5 Bleeding and Thrombosis: How to Prevent and to Manage

- 1. _____
- 2. _____
- 3. _____

Friday, May 4, 2012 – 7:00 to 8:30 am

Indicate preferred course number and alternate choice(s):

- 203.1 Strategies for Practice Efficiency
- 203.2 Improving your Publication Track Record: Editors' Recommendations
- 203.3 Periocular Surgery: Practical Pearls & Complications
- 203.4 Nose-ology: The Systematic Approach to Nasal Reconstruction
- 203.5 Managing Skin Cancer Without a Knife

- 1. _____
- 2. _____
- 3. _____

Saturday, May 5, 2012 – 7:00 to 8:30 am

Indicate preferred course number and alternate choice(s):

- 303.1 Coding: Up Close and Personal
- 303.2 Sunscreen Update
- 303.3 High Risk Tumors: Transplant Cases, Squamous Cell Carcinoma, & Immunosuppression
- 303.4 Advanced Practice Management
- 303.5 Dermpath Challenges: Interactive Session

- 1. _____
- 2. _____
- 3. _____

Morning Mini Total \$ _____

SUBTOTAL FROM PAGE 1 OF REGISTRATION FORM \$ _____

TOTAL FEES PAID \$ _____

Payment may be made by check or credit card. Check payments, payable to the ACMS, should be made in U.S. dollars only (allow 7 additional days for processing). Send checks and completed Registration Form to ACMS, 2012 Annual Meeting Registration, 555 East Wells Street, Suite 1100, Milwaukee, WI 53202.

For credit card payments:

Print name as it appears on card: _____

- Visa MasterCard American Express

Card #: _____ Expiration date: _____ Security Code: _____

Signature: _____

Registrations paid by credit card may either be mailed to the ACMS, 2012 Annual Meeting Registration, 555 East Wells Street, Suite 1100, Milwaukee, WI 53202, or faxed (make sure both sides of form are faxed) to (414) 276-2146. For questions about registration, please call (414) 347-1103 or email info@mohscollege.org. Cancellations before end of day February 21, 2012 will be refunded all registration fees minus a \$200.00 administration fee. Refunds will not be given after that date except in cases of extreme personal or family emergency. See page 8 for more information.