



ADVANCE REGISTRATION and DUES FORM
SOUTHERN SURGICAL ASSOCIATION
130th ANNUAL MEETING
THE BREAKERS, PALM BEACH, FL
December 2 – December 5, 2018

ADVANCE REGISTRATION OF \$150.00 and Dues of \$225.00 MUST BE RECEIVED NO LATER THAN September 1, 2018. The registration fee includes the President's Reception and Banquet on Tuesday, December 4, 2018. An additional banquet fee of \$150.00 must be paid for each spouse/guest of members or nonmembers who attends the President's Banquet. A late fee of \$50.00 will be applied to any dues, registration or banquet fee received after the September 1, 2018, deadline.

THIS YEAR WE ENCOURAGE EVERYONE TO PAY DUES & REGISTER ONLINE AT: <http://southernsurg.org/meeting.html>

[Your Username is usually your email address. If you don't know your password you can reset.](#)

You can complete all aspects of your registration and dues online including payment.

If you need help with your password or any other aspects of the online registration process, please contact technical support as follows.

Technical Support: support@doornsa.com or 800-581-3380

If you decide not to register online, you could email your credit card information to:

LEOverman@uams.edu

Or mail to

Lindsey Overman

UAMS

13 Children's Way, Slot512-40

Little Rock, AR 72202



**IF NOT REGISTERING ON LINE
ADVANCE REGISTRATION and DUES FORM
SOUTHERN SURGICAL ASSOCIATION
130th ANNUAL MEETING
THE BREAKERS, PALM BEACH, FL**

December 2 – December 5, 2018

ADVANCE REGISTRATION OF \$150.00 MUST BE RECEIVED NO LATER THAN WEDNESDAY, NOVEMBER 16, 2018. The registration fee includes the President's Reception and Banquet on Tuesday, December 4, 2018. An additional banquet fee of \$150.00 must be paid for each spouse/guest of members or nonmembers who attends the President's Banquet. A late fee of \$50.00 will be applied to any registration or banquet fee received after the September 1, 2018, deadline.

NAME _____
Please write name as it should appear on your name badge.

ADDRESS _____

CITY, STATE, & ZIP _____

EMAIL ADDRESS _____ Your receipt will be emailed to this address.

TELEPHONE _____ **MEMBER** _____ **NONMEMBER** _____ **GUEST OF** _____

SPOUSE AND/OR GUEST NAME(S) as it/they should appear on name badge(s).

<input type="checkbox"/> Dues	\$225.00
<input type="checkbox"/> Registration fee for Members or Nonmembers (banquet fee included)	\$150.00
<input type="checkbox"/> Banquet fee for spouse/guest	\$150.00
<input type="checkbox"/> Additional banquet fee if not registered At The Homestead*	\$150.00
<input type="checkbox"/> Late fee (After September 1, 2018 or On-site)	\$50.00
TOTAL AMOUNT PAID	_____

*As banquet cost is part of the meal plan an additional \$150 per person will be charged if not staying at The Breakers

Will you be attending the banquet?

Payment Information:

___ Check Enclosed

Payable to Southern Surgical Association

___ Credit Card

Card Number _____

_____ **Expiration Date**

Name as on card _____

Billing address _____

Signature _____

Questions should be directed to Lindsey Overman at (501) 364-5130 or leoverman@uams.edu.

IF NOT REGISTERING ON LINE PLEASE MAIL YOUR REGISTRATION FORM AND CHECK OR CREDIT CARD INFO TO:

Lindsey Overman
University of Arkansas for Medical Sciences (UAMS)
13 Children's Way, Slot 512-40
Little Rock, AR 72202