

Advanced Hands On Skull Base Dissection Workshop
May 9-11, 2019
Johnson & Johnson Lab, Palm Beach Gardens, Florida

Prepayment is required to secure your participation station.

Cancellation Policy

\$300 Fee for Notices Received More Than 60 Days in Advance.
Notices Received Less Than 60 Days Prior to Course Forfeit Total Fees Paid.
Refunds/Credits Will Not Be Issued for Failure to Attend Course In Part or In Whole.

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|--|--|----------------------|
| First Name: | Last Name: | Degree: |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Hospital or Facility: <input type="text"/> | | |
| Street/ PO Box: | City: | |
| <input type="text"/> | <input type="text"/> | |
| State/Prefecture: | Zip Code: | Country: |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Phone: | Fax: | |
| (Country Code - Area Code - Phone) | (Country Code - Area Code - Fax) | |
| <input type="text"/> - <input type="text"/> - <input type="text"/> | <input type="text"/> - <input type="text"/> - <input type="text"/> | |
| E-Mail Address: <input type="text"/> | | |

Registration Includes

Cadaver Dissection Practice (2 participants per station), Welcome Reception, 3 Lunches, and 2 Course Dinners for participant only.

Registration Fee

- \$2500 - Per Participant (includes new 3rd Edition color illustrated manual)
- \$2000 - Repeat Participant (**bring your book with you**)

I will attend the welcome reception

- Yes
- No

I will join the dinner banquet(s)(included in registration fee):

Thursday night Yes No
Friday night Yes No

Food Allergies or Restrictions:

Hotel Hampton Inn, Palm Beach Gardens. See link on the website soon for discounted rate.

To Reserve your hotel room:

(check for link on www.inerf.org website)

Method of Payment for Registration Fees:

Visa Master Card Wire Transfer Check

Name on Card:

Card Number:

Expiration:

Billing Address Postal Code for Credit Card (where you receive your bill)

_____ (Example: Tokyo 100-0101)

3 digit code on back of credit card: _____

I authorize INERF to process my credit card for the items checked.

I understand the cancellation fee stated above.

Signature of Credit Card Holder

Date

Fax completed form with payment information to 919-239-0266 Attn: Lori Radcliffe or email to Lori at lori@carolinaneuroscience.com