

# NATIONAL ASSOCIATION OF MEDICAL EXAMINERS®

INTERIM MEETING REGISTRATION  
BALTIMORE, MARYLAND - FEBRUARY 19, 2019

## *“Postmortem Radiology”*

SCIENTIFIC PROGRAM CHAIR: David Fowler, M.D.

REGISTRANT'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PRE REGISTRATION FEE (MEMBER): \$150.00 \_\_\_\_\_ (At Door Registration: \$200)

PRE REGISTRATION FEE (NON-MEMBER): \$200.00 \_\_\_\_\_ (At Door Registration: \$250)

PRE CME (3.5 Hours) FEE: \$100.00 \_\_\_\_\_ (At Door CME Fee: \$150)

SAM (3.5 Hours) (Member): \$ 35.00 \_\_\_\_\_

SAM (3.5 Hours) (Non-Member): \$105.00 \_\_\_\_\_

**Deadline February 1, 2019**

Total: \_\_\_\_\_

**Make Check or Money Order Payable to: NATIONAL ASSOCIATION OF MEDICAL EXAMINERS**

**\*PAYABLE IN U.S. DOLLARS**

All registration fees, including continuing medical education credit fee, must be received at the N.A.M.E. Secretariat by **February 1, 2019** to receive the pre-registration rate. All payments must be made by check, money order or Credit Card. **If paying by credit card you may fax your registration to 888-370-4839 or email to [name@thename.org](mailto:name@thename.org). If you are mailing your registration please send to: NAME, 362 Bristol Rd, Walnut Shade, MO 65771. Questions please call Denise McNally at 660-734-1891.**

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