

PRE-REGISTRATION FORM

TENNESSEE ACADEMY OF FAMILY PHYSICIANS 69th ANNUAL SCIENTIFIC ASSEMBLY OCTOBER 23-27, 2017, THE PARK VISTA DOUBLETREE, GATLINBURG

Your registration fee covers all scientific sessions and functions except for the Optional KA Study Group and Optional Dermoscopy Workshop on Tuesday, and the President's Banquet on Wednesday evening, and where additional fee(s) are indicated on this registration form.

MAKE YOUR REGISTRATION CHECK TO – Tennessee Academy of Family Physicians

Note: The Tennessee Academy of Family Physicians does NOT accept credit cards in payment of fees.

Names for all attendees must be provided to obtain a TNAFP badge which is required for admission to all educational sessions, all functions and the TNAFP exhibit hall. No badge; no entrance. Please clearly print all information on registration form.

Important: Speaker handouts will be available online prior to the conference. Pre-registered attendees will receive instructions by email on downloading speaker handouts approximately two-weeks out from the meeting.

If you prefer a printed copy of speaker handouts, printed copies are available by pre-registration, by using this form, at a cost of \$50 in-advance by Friday, October 6.

YOUR NAME: _____

_____ M.D. _____ D.O. _____ P.A. _____ N.P. _____ R.N. Other: _____

*NAME AS YOU WISH PRINTED ON YOUR BADGE: _____

NAME SPOUSE/SIGNIFICANT OTHER ATTENDING (limited to one person): _____

NAME GUEST(S) ATTENDING: _____

NAMES OF CHILDREN & AGES: _____

PHONE: (____) _____ FAX: (____) _____

EMAIL: _____ *(Instructions to download speaker handouts will be sent by email approximately two weeks out from the meeting so it's important for us to receive your email address.)*

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

Please list any dietary restrictions: _____

Medical Students and Residents- Please provide the name, city & state of your medical school or residency program and your anticipated completion date: _____

Tennessee AFP Adopted Board Policy on Registration Fees:

*****Full registration fee paid includes only one additional adult be it your spouse, significant other or guest (not to include a member's spouse who is a health professional seeking CME who would pay the member registration fee) and all of the Paid Registered Attendee's children age 18 and under at no charge.**

^Names for all persons who will be attending under your registration fee paid and receiving a TNAFP badge to access the exhibit hall and food functions, must be provided on this registration form.

^Additional persons attending with you who are non-medical guests, excluding one adult guest who is included in your registration fee, are charged a \$25 fee to cover food costs.

^Additional persons attending with you who are health/medical professionals seeking CME credit for attendance at this scientific assembly must pay the appropriate fee listed below.

**RETURN THIS COMPLETED REGISTRATION FORM (Both Front & Back Please) BY FRIDAY, OCTOBER 6 TO –
TENNESSEE ACADEMY OF FAMILY PHYSICIANS
212 Overlook Circle, Suite 201, Brentwood, TN 37027**

Email: tnafp@bellsouth.net Fax: 615-370-5199 Phone: 1-800-897-5949; 615-370-5144

*Please do not mail, email or fax registration to the Tennessee AFP office after Friday, October 6. Pre-registration deadline is October 6-

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***See previous page for TNAFP Adopted Board Policy on Registration Fees -*

Registration Fees: (After October 6, pre-registration fees will NOT apply; at-meeting fees will apply)

	Pre-Registration	At-Meeting	# To Attend	Amount
***AAFP Member	\$ 300.00	\$ 400.00	_____	\$ _____
AAFP Member Spouse Who is Health Professional Seeking CME	\$ 300.00	\$ 400.00	_____	\$ _____
***Tennessee AAFP Life Member (age 70+)	\$ 125.00	\$ 125.00	_____	\$ _____
***Non-AAFP Member	\$ 425.00	\$ 525.00	_____	\$ _____
***Resident	\$ 35.00	\$ 35.00	_____	\$ _____
***Medical Student	\$ 25.00	\$ 25.00	_____	\$ _____
Additional Non-Medical Adult Guests of Paid Registrant (Excludes one adult covered by full registration paid)	\$ 25.00	\$ 25.00	_____	\$ _____

Function Reservations Required:

Wednesday, 10/25: Resident & Student Lunch (no charge)

Pre-registration required. Attendance limited to Resident & Student Members and their spouse/significant other only.

List any dietary restrictions: _____ \$ n/a

Wednesday, 10/25: President's Banquet (\$40.00 each)

List any dietary restrictions: _____ \$ _____

Register for Tuesday, 10/24, KA Study Group Session on "Diabetes" (8:00 am-2:00 pm):

(\$150 charge for those registered for the TNAFP Annual Meeting; \$225 charge if not registered for the TNAFP Annual Meeting. Lunch provided. **Pre-registration by 10/6 is REQUIRED.** Minimum 20 registrants to hold; Maximum 30 registrants)

*(See details of workshop under Tuesday, October 24, CME listing.)

Fee for those registered for Annual Assembly	\$ 150.00	n/a	_____	\$ _____
Fee for those NOT registered for Annual Assembly	\$ 225.00	n/a	_____	\$ _____
(You MUST provide your ABFP ID # _____ or your AAFP ID # _____ with pre-registration.)				

Register for Tuesday, 10/24, Optional Workshop on "Dermoscopy" (12:45 pm-2:45 pm):

(\$75 charge. **Pre-registration by 10/6 is REQUIRED.** Minimum 20 registrants to hold; Maximum 30 registrants)

*(See details of workshop under Tuesday, October 24, CME listing.)

Registration Fee	\$ 75.00	\$ 75.00	_____	\$ _____
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Register ONLY for Friday "Opioid Prescribing & Tennessee Pain Management Guidelines" (11:45 am-1:45 pm):

Use to register if you are NOT attending the entire TNAFP Annual Assembly. Registration for attendance at "Opioid Prescribing" **only** is available for a \$75.00 registration fee if you are **NOT attending the entire Tennessee AAFP Annual Meeting.**
PLEASE NOTE ATTENDEES REGISTERED FOR FULL TNAFP ANNUAL ASSEMBLY: There is no additional fee for you; this presentation is included in your annual meeting registration fee.

Opioid Prescribing Fee for those NOT registering for Entire Annual Assembly	\$ 75.00	\$ 75.00	_____	\$ _____
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Purchase Printed Copies of Speaker Handouts (preorder by October 6 required):

Speaker handouts will be available online. Pre-registered attendees will receive instructions on downloading speaker handouts approximately two-weeks out from the meeting. If you prefer printed copies of speaker handouts, printed copies are available by pre-registration purchase only at a cost of **\$50 in-advance by Friday, October 6.** Order by using this pre-registration form.

I wish to receive Printed Copies of Speaker Handouts	\$ 50.00	n/a	_____	\$ _____
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TOTAL PAID \$ _____

TOTAL OWED \$ _____

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