



2014 Spring Clinical Lipid Update

Jointly hosted by the Pacific and Southwest regional chapters

March 13-16, 2014
Grand Wailea • Maui, HI

Guest name(s), if attending meeting:

First Name Middle Initial Last Name

Mailing Address

City State or Province Zip Country

Phone Emergency Contact/Phone

Email

Check all that apply: ☐ MD/DO/PhD ☐ RN ☐ NP ☐ PA ☐ RPH ☐ PharmD ☐ RD ☐ Other _____

Membership status:

- ☐ I am currently a member.
☐ My application for membership has been submitted and confirmed.
☐ I will apply at www.lipid.org.
☐ Please send me membership information.

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Circle fee based on attendee type

NLA Member Early Bird Rate Up to 1/31/14	NLA Member Discounted Rate After 1/31/14	Non-member Rate	Trainee Rate†
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- | | | | | |
|--|-------|-------|-------|-------|
| ☐ Clinical Lipid Update
March 13-16, 2014
<i>Includes one admission badge to Exhibit Hall for all food functions.</i> | \$525 | \$575 | \$995 | \$200 |
|--|-------|-------|-------|-------|

3

Special Foundation of the NLA Event: Luau

- | | | | | |
|---|----------|----------|----------|----------|
| ☐ Luau \$150 x _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
|---|----------|----------|----------|----------|

Guest Fees

- | | | | | |
|--|----------|----------|----------|----------|
| ☐ Exhibit Hall Pass | | | | |
| Guest(s) \$150 x _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |

Combined Total Fees

\$ _____	\$ _____	\$ _____	\$ _____
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Payment Method

- ☐ VISA ☐ MC ☐ AMEX ☐ Check Make checks payable to the NLA

Credit Card # Exp. Date

Signature

Name on Card

3 Easy Ways To Register



Online
www.lipid.org/springclu



Mail
National Lipid Association
6816 Southpoint Parkway, Suite 1000
Jacksonville, FL 32216



Fax
NLA at 904-998-0855
Fax with credit card number and signature

Important Information

†**Trainee Rate:** Available for those individuals actively enrolled in a graduate or postgraduate training program for the treatment or investigation of lipid disorders and in pursuit of full credentialing in their specialized area of medical study. A letter from the program director or the school registrar must accompany the application. **Cannot register online. Please mail or fax registration.

Registration: Registration and payment must be received no later than **January 31, 2014**. After this date a syllabus and name badge cannot be guaranteed.

Cancellation: Telephone Cancellations will not be accepted. A written notice of cancellation must be received no later than **January 31, 2014**. This includes Social Events and Guest Fees. There will be a \$25 fee for all cancellations.

Special Needs:

ADA Compliance: In accordance with the Americans with Disabilities Act, attendees who need additional reasonable accommodations or who have special needs should contact the NLA at 904-998-0854.

REGISTER ONLINE AT LIPID.ORG/SPRINGCLU