

20th Annual AMERICAN ACADEMY OF EMERGENCY MEDICINE Scientific Assembly

Registration Form

Print your name below as you wish it to appear on your badge.

First Name: _____ Degree (MD/DO) _____
Last Name: _____
Send additional conference information to my ☐ Home ☐ Institution (address below)
Institution: _____
Address: _____
City: _____ State: _____ ZIP: _____
Phone: _____ Fax: _____
Email: _____

I require: ☐ AMA PRA Category 1 Credit(s)™ ☐ Category 2A AOA Credit ☐ No Credit Necessary

	Registration on or Before January 20, 2014	Non-AAEM Members	AAEM Members	Non-AAEM Members
Tuesday, February 11, 2014				
Resuscitation For Emergency Physicians (7:30am-5pm)	☐ \$500.00	☐ \$850.00	☐ \$600.00	☐ \$950.00
Resuscitation For Emergency Physicians (1 day course) AND High Risk Electrocardiography	☐ \$650.00	☐ \$1,000.00	☐ \$750.00	☐ \$1,100.00
Advanced Ultrasound* (8am-4pm) Pick 6 modules: ☐ Echo & Aorta ☐ Head & Neck ☐ Musculoskeletal ☐ Practice with an Expert ☐ Testicular Ultrasound ☐ Vascular Access	☐ \$425.00	☐ \$575.00	☐ \$525.00	☐ \$675.00
Advanced Ultrasound* Choose: ☐ 8am-12pm ☐ 1pm-5pm Pick 3 modules: ☐ Gastrointestinal ☐ Musculoskeletal ☐ Practice with an Expert ☐ Testicular Ultrasound ☐ Vascular Access	☐ \$300.00	☐ \$450.00	☐ \$400.00	☐ \$550.00
Introductory Ultrasound* (8am-4:15pm) Health Care Reform: Is Your ED Prepared? The Operations Management Perspective (2 day course) (Tuesday 1pm-5pm; Wednesday 8am-12pm)	☐ \$425.00	☐ \$575.00	☐ \$525.00	☐ \$675.00
Pediatric Emergency Department Simulation: Critical Skills from Delivery to Stepping on the School Bus!* (1pm-5pm) This course is held offsite. Transportation provided with 12:30pm departure.	☐ \$300.00	☐ \$450.00	☐ \$400.00	☐ \$550.00
High Risk Electrocardiography (8am-12pm)	☐ \$250.00	☐ \$400.00	☐ \$350.00	☐ \$500.00
Living the Tactical Life: Lessons and Skills from Tactical Military Medicine (7:30am-12pm)	☐ FREE (residents)	☐ FREE (non-member residents)	☐ FREE (residents)	☐ FREE (non-member residents)

*Some of these activities are held concurrently. Due to their hands-on format, registration in each of the pre-conference courses is limited.

**The registration fee will be refunded within 30 days after the conference for USAEM members who attend the course.

Wednesday, February 12 – Saturday, February 15, 2014	Refundable Deposit for AAEM Members	Non-AAEM Members
Full-Voting, Associate, International, Emeritus, Affiliate and Fellows-in-Training Physician Member	☐ \$200.00*** Fair on Feb. 12, 2014	☐ \$500.00 ☐ I am attending the Career Connections Fair on Feb. 12, 2014
AAEM/RSA Resident & Transitional Member	☐ \$100.00*** ☐ I am attending the Career Connections Fair on Feb. 12, 2014 ☐ I am attending the Resident In-Training Exam Review on Feb. 14, 2014 (Free)	☐ \$155.00*** ☐ I am attending the Career Connections Fair on Feb. 12, 2014 ☐ I am attending the Resident In-Training Exam Review on Feb. 14, 2014 (Free)
AAEM/RSA Student Member	☐ \$55.00*** /**** ☐ I am attending the Student Track on Feb. 12, 2014 (Free)	☐ \$110.00*** ☐ I am attending the Student Track on Feb. 12, 2014 (Free)
Allied Health Professional (PAs, NPs and RN's)	Contact the office at 800-884-2236 or info@aaem.org for membership rates	☐ \$300.00
PA Fellow		☐ \$75.00
TOTAL DUE: _____		

***Required deposit for all AAEM members. You will have the option now or onsite of donating this deposit to the AAEM Foundation. Otherwise, deposits paid by credit card will be automatically credited to the same account number. Deposits paid by check will be paid back by check, made payable to the institution or person issuing the original deposit.

****All resident and student non-member registration fees and student free member registration fees will go towards the 2014-2015 AAEM/RSA membership dues, with remaining amount refunded.

☐ I would like to donate my deposit to the AAEM Foundation.
☐ I do not want my name published in AAEM materials/publications in recognition of my donation.

Method of Payment (check one): ☐ Check ☐ VISA ☐ MasterCard ☐ Discover

Card Number: _____ Expiration Date: _____

Cardholder Name: _____

Signature: _____

☐ Please send me information about becoming a member of ☐ AAEM ☐ AAEM/RSA ☐ YPS

☐ As a registrant, I authorize AAEM to publish my first and last name (without designations) onto the mobile event app which is available to exhibitors and other attendees. No other contact information will be provided on the mobile event app unless I enter it into my personal profile on the mobile event app. AAEM membership lists are private.

Lead Retrieval Service for Exhibitors: AAEM offers a lead retrieval service to exhibitors. Exhibitors can access the contact information you provide upon registering by entering the 5 digit code from your name badge onto their device. If you do not want this information provided to exhibitors, do not allow exhibitors to enter the 5 digit code from your name badge into their device. Should you not wish to provide any contact information to exhibitors, please select "opt-out" below.

☐ Opt out (I do not want a 5 digit code inserted onto my name badge with which exhibitors may access my contact information.)

Please Note: On occasion, an AAEM photographer or videographer may take photos/videos at the 20th Annual Scientific Assembly of attendees participating in sessions, functions and/or activities. Please be aware that these photos/videos are for AAEM use only and may appear in AAEM conference brochures, programs, publications, the AAEM website or other AAEM materials. Your attendance at the conference constitutes your permission and consent for this photography.

Return completed form with appropriate payment to:

20th Annual Scientific Assembly, American Academy of Emergency Medicine
555 East Wells Street, Suite 1100, Milwaukee, WI 53202 or fax to: (414) 276-3349

February 11-15, 2014 New York Hilton Midtown New York City, NY