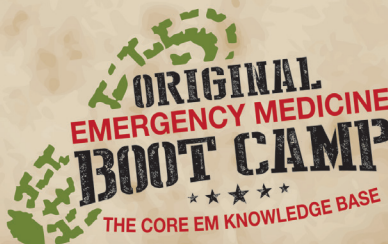


## REGISTRATION FORM

Register online at  
[www.EMBootCamp.com](http://www.EMBootCamp.com)

To obtain more information by phone,  
call 1-800-458-4779.  
(9:00am-4:30pm ET, M-F)



### Mail Completed Form To:

The Center for Medical Education, Inc.  
P.O. Box 600  
Creamery, PA 19430 USA

### or Fax Your Form To:

(888) 329-8626

### Main Course Pricing

|                                | Full Tuition | Early Bird Tuition |
|--------------------------------|--------------|--------------------|
| PA's / NP's / RN's / Residents | \$695        | \$645*             |
| Physicians                     | \$795        | \$745*             |

\*Early bird tuition deadline dates are located in the "Select Location" section below.

### Did You Know?

You Can Now Attend the Original EM Boot Camp Workshops Without Registering for the Main Course!

### Workshop Pricing

|                                                         | PA's / NP's / RN's / Residents | Physicians |
|---------------------------------------------------------|--------------------------------|------------|
| Emergency Ultrasound Workshop                           | \$895                          | \$995      |
| Emergency Procedures Workshop                           | \$645                          | \$645      |
| Morning Advanced EM Pharmacology Workshop (Part 1)      | \$165                          | \$165      |
| Afternoon Advanced EM Pharmacology Workshop (Part 2)    | \$165                          | \$165      |
| Advanced EM Pharmacology Workshops (Parts 1 & 2 Bundle) | \$295                          | \$295      |

**Bundle and Save!** Register for Part 1: Morning Session and Part 2: Afternoon Session for \$295 (A \$35 Savings).

### Registrant Information

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Email \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Title (check one): ☐ Physician - MD ☐ Physician - DO ☐ Physician Assistant - PA ☐ Nurse Practitioner - NP ☐ Registered Nurse - RN  
☐ Resident - MD ☐ Resident - DO

### Select Location (Select One)

☐ Las Vegas, Nevada: July 21-24, 2020

Main Course  
Planet Hollywood Resort & Casino

Early Bird Rate Deadline: June 8, 2020 by 9 PM PDT.

☐ Las Vegas, Nevada – July Workshops Only

Register me for the selected workshops and not the main course.

☐ Las Vegas Nevada: December 1-4, 2020

Main Course  
Planet Hollywood Resort & Casino

Early Bird Rate Deadline: October 19, 2020 by 9 PM PDT.

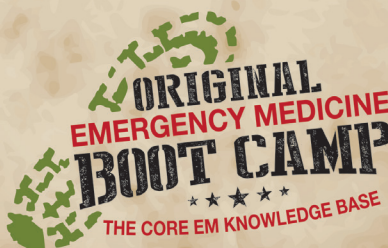
☐ Las Vegas, Nevada – December Workshops Only

Register me for the selected workshops and not the main course.

## REGISTRATION FORM

Register online at  
[www.EMBootCamp.com](http://www.EMBootCamp.com)

To obtain more information by phone,  
call 1-800-458-4779.  
(9:00am-4:30pm ET, M-F)



### Mail Completed Form To:

The Center for Medical Education, Inc.  
P.O. Box 600  
Creamery, PA 19430 USA

### or Fax Your Form To:

(888) 329-8626

### Registrant Information

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

### Workshops

#### Emergency Ultrasound Workshop (Select One)

**Special Offer:** Attend the July 19th or November 29th Ultrasound Workshop and receive free tuition to the Advanced EM Pharmacology Workshops (a \$295 value) on the following day, July 20th or November 30th. Please call the office at 800-458-4779 for more details.

☐ **Emergency Ultrasound Workshop (Full-Day)**  
(July 19th, 8:00am-5:45pm) / (November 29th, 8:00am-5:45pm)

☐ **Emergency Ultrasound Workshop (Full-Day)**  
(July 20th, 8:00am-5:45pm) / (November 30th, 8:00am-5:45pm)

Note: Each full-day session can accommodate a maximum of 40 participants. Register early while spots are open.

#### Emergency Procedures Workshop (Select One)

☐ **Morning Emergency Procedures Workshop (Half-Day)**  
(July 20th, 8:00am-12:30pm) / (November 30th, 8:00am-12:30pm)

☐ **Afternoon Emergency Procedures Workshop (Half-Day)**  
(July 20th, 1:30pm-6:00pm) / (November 30th, 1:30pm-6:00pm)

Note: Each half-day session can accommodate a maximum of 40 participants. We reserve the right to reassign you to either the morning or afternoon session (we will notify and get your approval in advance). When the Procedures Workshops are full, there may be opportunities to add additional attendees in the event of cancellations. Please call the office for availability at 800-458-4779.

#### Advanced EM Pharmacology Workshops (Select Part 1, Part 2 or Both)

**Bundle and Save!** Register for Part 1: Morning Session AND Part 2: Afternoon Session for \$295 (A \$35 Savings).

☐ **Morning Advanced EM Pharmacology Workshop (Part 1)**  
(July 20th, 8:00am-12:15pm) / (November 30th, 8:00am-12:15pm)

☐ **Afternoon Advanced EM Pharmacology Workshop (Part 2)**  
(July 20th, 1:45pm-6:00pm) / (November 30th, 1:45pm-6:00pm)

☐ **Advanced EM Pharmacology Workshops (Parts 1 & 2 Bundle)**  
(July 20th, **Part 1** @ 8:00am-12:15pm & **Part 2** @ 1:45pm-6:00pm)  
(November 30th, **Part 1** @ 8:00am-12:15pm & **Part 2** @ 1:45pm-6:00pm)

### Billing Information

Credit Card Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date \_\_\_\_\_ CVV#    (Last 3 numbers on back of Visa and MasterCards)

First Name of Authorized Cardholder \_\_\_\_\_

Last Name of Authorized Cardholder \_\_\_\_\_

Billing Address \_\_\_\_\_

Billing City \_\_\_\_\_ Billing State/Province \_\_\_\_\_ Billing Zip/Postal Code \_\_\_\_\_

Billing Country \_\_\_\_\_ Billing Email \_\_\_\_\_



☐ Visa



☐ MasterCard

☐ Check # \_\_\_\_\_

Made payable to  
"Center for Medical  
Education" in U.S. funds