



Canadian Society of Otolaryngology-Head & Neck Surgery
2017 Saskatoon, SK – 71st Annual Meeting, June 10-13
REGISTRATION

Name _____ Companion's Name (if attending) _____

Address _____ City _____ Prov. _____

Postal Code _____ Email _____ Phone _____

REGISTRATION FEE INCLUDES GST/HST & PROVIDES admission to the scientific sessions, exhibits, lunches & coffees, as well as the Welcoming Reception, and the President's Banquet. **PAYMENT WILL BE ACCEPTED BY THE OFFICE UNTIL FRIDAY JUNE 2ND, 2017. AFTER THIS DATE YOU WILL BE REQUIRED TO REGISTER AT THE ON-SITE MEETING DESK IN SASKATOON.**

☒	CATEGORY	EARLY BIRD FEE (to May 14 th)	FEE (after May 14 th)
	ACTIVE MEMBER	\$650	\$750
	NON-MEMBER MD	\$825	\$925
	☐ RESIDENT ☐ FELLOW	\$400	\$500
	ALLIED HEALTH PROFESSIONAL (EXAMPLE – MEDICAL STUDENT, NURSE)	\$400	\$500
	EMERITUS (ATTENDING SOCIAL EVENTS)	\$250	\$350
	EMERITUS (SCIENTIFIC PROGRAM ONLY)	No Charge	No Charge
	COMPANION FEE (Welcoming Reception, President's Banquet & Companion's breakfasts)	\$175	\$275

SATURDAY, JUNE 10TH - PRE-CONVENTION COURSES - TBA

Arrangements are being finalized for several pre-convention courses to be held on Saturday, June 10. Details and registration, as they become available, will be posted on the CSOHNS website.

Registration
Subtotal: \$

I would be interested in a supervised children's evening during the Presidents Banquet? ☐ Number of children _____ Ages _____
☐ Check if you require vegetarian meals Other dietary concerns / allergies:

ADDITIONAL EVENT - Tour and Tastings at *Lucky Bastard Distillers*, Saskatchewan's Premier Distillery started by a physician, Dr. Michael Goldney. Lunch to follow at Canada's Top Chef Competition Winner, Dale MacKay's, *Ayden's Kitchen and Bar*.

COST PER PERSON

#OF PEOPLE

TOTAL

MONDAY JUNE 12 – Distillery Tour with Lunch

\$50

Events
Subtotal: \$

 Canadian Otolaryngology Head & Neck Surgery Fund

Please consider a contribution to the Fund.

I wish to make a donation in the amount of: ☐ \$50 ☐ \$75 ☐ \$100 ☐ Other

A tax receipt will be issued for donations of \$25 or more. *Thank-you for your support!*

\$ _____

☒	METHODS OF PAYMENT		HST/GST #106866965
	CHEQUE	Payable to the Society. Forward payment with your form to the Society office. Contact information below.	
	 Visa Credit Only	Card Number: _____ Expiry Date: ____ / ____ Card Holder's Name: _____ FAX: (519) 846-9529 ~ PHONE: (800) 655-9533 / (519) 846-0630 ~ MAIL: Forward to address below.	
	ONLINE	Go to www.entcanada.org	

GRAND TOTAL ENCLOSED: \$