

# REGISTRATION FORM



(Registration closes 11/4/19 or when sold out. NO onsite registrations.)

**Step 1: Create Online Account** at [nei.global/CreateNewUser](http://nei.global/CreateNewUser) (if you don't already have one)

**Step 2: Complete Form and Submit** (print clearly)

Name (First, MI, Last): \_\_\_\_\_ NEI ID # \_\_\_\_\_

Credentials (MD, NP, etc.): \_\_\_\_\_ Specialty: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email (required): \_\_\_\_\_

National Provider Identifier (NPI): \_\_\_\_\_

☐ I don't have an NPI number

## Step 3: Register Me For:

| NEI CONGRESS (Nov. 7-10, starts and ends at 1:00 pm)                                                                                                               | Early-Bird<br>(ends 6/28/19) | Standard<br>(ends 11/4/19) |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|----------------------------|
| <input type="checkbox"/> Member                                                                                                                                    | <b>\$649</b>                 | <b>\$749</b>               |
| <input type="checkbox"/> Non-member                                                                                                                                | <b>\$799</b>                 | <b>\$899</b>               |
| <input type="checkbox"/> Military <sup>†</sup>                                                                                                                     | <b>\$479</b>                 | <b>\$579</b>               |
| <input type="checkbox"/> Student or Resident <sup>†</sup>                                                                                                          | <b>\$299</b>                 | <b>\$349</b>               |
| CHILD AND ADOLESCENT PSYCHIATRY ACADEMY (Nov. 6, 1:00 pm – 5:45 pm)                                                                                                |                              |                            |
| <input type="checkbox"/> Member                                                                                                                                    | <b>\$109</b>                 | <b>\$159</b>               |
| <input type="checkbox"/> Non-member                                                                                                                                | <b>\$159</b>                 | <b>\$209</b>               |
| PRE-CONFERENCE WORKSHOP: Wellness and Brain Health<br>(Nov. 7, 8:15 am – 11:45 am)                                                                                 |                              |                            |
| <input type="checkbox"/> Member                                                                                                                                    | <b>\$99</b>                  | <b>\$149</b>               |
| <input type="checkbox"/> Non-member                                                                                                                                | <b>\$149</b>                 | <b>\$199</b>               |
| <sup>†</sup> Must provide proof. <a href="#">View list</a> of acceptable proof. QUESTIONS? Call 888.535.5600 or visit <a href="http://nei.global">nei.global</a> . |                              |                            |

## Step 4: Payment Details

**TOTAL \$** \_\_\_\_\_ ☐ **Check enclosed** (payable to Neuroscience Education Institute)

Credit Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVV: \_\_\_\_\_

☐ Visa ☐ MasterCard ☐ American Express

Name on card: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Submit this form** fax: 760.931.8713 or mail: 5900 La Place Court, Suite 120, Carlsbad, CA 92008