A-Cross Medicine Reviews
Registration

Thank you for registering to attend our conference. You will need to complete a separate registration form for each individual attending.
If you have any questions about registration, please call 1-855-722-7677 or 719-538-0006.

Full Name

First Name

Last Name

Address

Street Address

Address Line 2

City

State

Postal Code / Zip Code

Country

E-mail

Phone Number

Please select the Date and Location

- ☐ March 7-10, 2013 Crested Butte, CO
- ☐ March 14-17, 2013 Crested Butte, CO
- ☐ March 21-24, 2013 Steamboat Springs, CO
- ☐ March 28-31, 2013 Steamboat Springs, CO
- ☐ April 4-7, 2013 Steamboat Springs, CO
- ☐ May 2-5, 2013 Las Vegas
- ☐ August 30-September 2, 2013 Las Vegas
- ☐ November 14-17, 2013 Las Vegas
- ☐ December 5-8, 2013 Las Vegas

Course Fees

Physicians: $750
Nurse Practitioners and Physician Assistants: $550
Medical Residents or Fellows: $300 (must provide proof of residency/fellowship)
Student rate for those attending MD/DO, nurse practitioner, or physician assistant schools: $250 (must provide proof of enrollment)

Participants will receive access to a PDF of the course syllabus*. You must download the syllabus to your laptop or tablet prior to attending the course. There will not be internet access in the meeting room. Please be sure that your device is fully charged since there will be a limited number of outlets available.

*A print copy of the syllabus is optional for $50. Please designate below if you would like a print copy.

Send Check or Credit Card information via mail or fax to 1-855-722-7677:

A-Cross Medicine Reviews
P.O. Box 38744
Colorado Springs, CO 80937

Or you can call 1-855-722-7677 or 719-538-0006, or register online at www.a-crossmedicinereviews.com

- ◯ Check
- ◯ Credit card _____ Exp date: _____
  3 or 4 digit code _____

Print Copy of Syllabus for $50.

- ☐ Please check the box to indicate that you wish to receive a paper print copy at the conference. Remember to add $50 to your total if writing a check.