GROUP DISCOUNTS

Hawaiian Eye™ 2014

Retina™ 2014

January 18-24, 2014

GRAND HYATT KAUAI

KAUAI, HAWAII

Bring the whole team!

Update your practice • Get registration discounts

Ophthalmologists: Bring nurses and/or administrators from your practice and receive the "Practice Plan" discount:

- **Save $250** on each nurse/administrator registration when at least 2 attend with a physician
- **Save $300** on each nurse/administrator registration when 3+ attend with a physician

This continuing medical education activity is sponsored by

VINDICO medical education

Practice Plan Registration

Hawaiian Eye 2014 Retina 2014

PHYSICIAN CONTACT INFORMATION:

First/Given Name | Middle | Last/Family Name | Suffix | Degree

Address

City | State/Province | Zip/Postal Code

Country | E-mail (for confirmation purposes)

Phone (work) | Phone (mobile) | Fax (for confirmation purposes)

Year of Birth | Year of Medical School Graduation | State of Practice

REGISTER TODAY!

By phone: 877-307-5225, ext. 219 or 476
+(1) 856-848-1712, ext. 219 or 476
Office hours Mon – Fri, 9:00 am – 5:00 pm

Fax this form to: +(1) 856-251-0278

Mail this form to: Meeting Registration
6900 Grove Road
Thorofare, NJ 08086-9447 USA

E-mail questions to: meetings@registrationAMS.com

OPHTHALMOLOGIST REGISTRATION

Register before 9/30/13

☐ **Hawaiian Eye Comprehensive Ophthalmologist:**
$1,245 + 4.16% Hawaii Excise Tax = $1,296.79

☐ **Retina Specialist:**
$1,245 + 4.16% Hawaii Excise Tax = $1,296.79

Register after 9/30/13

☐ **Hawaiian Eye Comprehensive Ophthalmologist:**
$1,395 + 4.16% Hawaii Excise Tax = $1,453.03

☐ **Retina Specialist:**
$1,395 + 4.16% Hawaii Excise Tax = $1,453.03

These programs offer *AMA PRA Category 1 Credits™*. Registration is valid for physicians only and includes admission to general program sessions, workshops, seminars, and the exhibit hall.

Primary Subspecialty (please check one):

☐ General Ophthalmology ☐ Pediatrics/Strabismus ☐ Retina
☐ Glaucoma ☐ Contact Lenses ☐ Neurosciences
☐ Cornea/External Disease ☐ Oculoplastics ☐ Optics
☐ Cataract Surgery ☐ Refractive Surgery

CME Activity Request:

☐ Yes, I would like the opportunity to earn CME credits through future activities sponsored by Vindico Medical Education.

NURSE/ALLIED HEALTH & ADMINISTRATOR REGISTRATION

☐ **At least 2 Nurse or Administrator Attendees:**
$395 + 4.16% Hawaii Excise Tax = $411.43 each

☐ **3 or more Nurse or Administrator Attendees:**
$345 + 4.16% Hawaii Excise Tax = $359.35 each

Registration includes admission to general sessions, workshops, and the exhibit hall. The Nurse/Allied Health program offers CNE and JCAHPO credits; all nurse/allied health professionals must be actively employed in a medical practice. The Administrator program does not offer medical education credits; all administrators must be actively employed in a medical practice.

Nurse/Allied Health Attendees:

	RN	LPN	Tech/Allied Health
1. _____	☐	☐	☐
2. _____	☐	☐	☐
3. _____	☐	☐	☐
4. _____	☐	☐	☐
5. _____	☐	☐	☐

Administrator Attendees:

1. _____
2. _____
3. _____
4. _____
5. _____

PROVIDE YOUR PAYMENT DETAILS

Total Registration US$ _____

☐ Check Enclosed (made payable to "Hawaiian Eye 2014" or "Retina 2014")

Charge My: ☐ Visa ☐ MasterCard ☐ American Express

Account Number _____

3-4 Digit Security Code _____ Exp Date _____

Signature _____

Hawaiian Eye Federal ID #: 27-4318741
Cancellations: Requests for refunds must be submitted in writing prior to January 3, 2014. There will be a $200 cancellation fee applied per person for each physician and $100 applied per person for each nurse or administrator. After January 3, 2014, there will be no refund.
ADA Compliance: In compliance with the Americans with Disabilities Act of 1990, we will make all reasonable efforts to accommodate persons with disabilities. Please call with your requests.

Hawaiian Eye Priority Code: 975-887
Retina Priority Code: 972-887