



REGISTRATION FORM

Looking into the Future of ART:

Diagnosis, the Laboratory, Ethics and Treatment

New England Fertility Society ~ 16th Annual Meeting ~ May 4-5, 2018 ~ Chatham, MA

Please print or type clearly, or register online at www.nefs.org

First Name M.I. Last Name Degree (ie. MD, RN, etc.)

Institution

Mailing Address

City

State

Zip

Telephone

Cell Phone

Email (**REQUIRED** for confirmations and any changes* please print clearly)

SOCIAL EVENTS AND GROUP DISCOUNTS

I plan to attend the Friday Night Social Event at 8pm and I will bring my guests for a total of _____ guests for Friday night.

I plan to attend the Saturday Night Social Event at 5:30pm and I will bring my guests for a total of _____ guests for Saturday night. I have booked a total of _____ nights at the Chatham Bars Inn.

I plan to come to the Chatham Bars Inn a day early on Thursday, May 3rd to enjoy the activities down the Cape.

RATES (please check all that apply):

PGS Course rate: **\$25** (CME is pending approval)

NEFS Member discount rate for MDs, PhDs & Industry: **\$300**

NEFS Member discount rate for Nurses, Embryologists, Lab Techs, Students, Fellows, Trainees and Other Support Staff: **\$175**

NON-NEFS Member rate for MDs, PhDs & Industry: **\$350**

NON-NEFS NEFS Member rate for Nurses, Embryologists, Lab Techs, Students, Fellows, Trainees and Other Support Staff: **\$270**

Guest Rate: **\$150** (Adult friends and family members who accompany a full meeting registrant and may attend meals & events)

Guest(s) Name (include ALL guests, including children) My Guest will attend the Roundtable Lunch on Saturday at 12:00.

I require special assistance (wheelchair, auxiliary aids) or special dietary requirements, and explain below:

ROUNDTABLE LUNCH TOPICS

Roundtable topics are not YET finalized. You will receive a notification to sign up for a roundtable once it has been fully finalized. Thank you for your patience.

**Guests will be placed at a NO TOPIC table unless room becomes available at a topic table they wish to join.*

PAYMENT OPTIONS (please check one):

Check or money order payable to New England Fertility Society

Credit Card Payment:

Visa MasterCard AMEX Discover

Name as it appears on the card

Card Number

Expiration Date

Security Code on back

Billing Zip Code

Phone Number

Or you can register and make your payment online at www.nefs.org on the Annual Meeting Page.

MAIL TO:

Registrar - NEFS 16th Annual Meeting 2018
110 Patricia Drive Tewksbury, MA 01876 USA
Phone/FAX: 978-640-9176
Email: michellepicher@nefs.org