

APEX: The AANA Professional Excellence Series PA, NP, RN & Support Team Registration OLC Education & Conference Center • Rosemont, Ill., USA

Personal Information

First Name: _____ Middle Name: _____
Last Name: _____ Suffix (Sr., Jr.): _____
Professional Designation (PA, NP, RN): _____ Additional Degrees: _____
Business Phone: _____ Mobile Phone: _____
Business Email: _____ Personal Email: _____

Primary Address

Company/Organization: _____
Street 1: _____
Street 2: _____ Street 3: _____
City: _____ State/Province: _____
Zip/Postal Code: _____ Country: _____

Select Your APEX Course(s)

- 604 Modern Trends in Hip Arthroscopy | April 21-23, 2017\$800
- 605 Mission Possible for Today's Shoulder Surgeon| July 28-30, 2017\$800
- 607 Advanced Decision-Making and Treatment of Articular Cartilage and Meniscus Pathology in the Knee:
New Frontiers to Practical Approaches | August 18-20, 2017.....\$800
- 608 Emerging Concepts in Patellofemoral Surgery: From Instability to Arthroplasty | September 8-9, 2017\$800
- 609 Controversies in Foot and Ankle Arthroscopy and Sports Medicine: Solutions and Outcomes |
September 9-10, 2017\$800
- 610 Comprehensive Hip Arthroscopy: Cartilage, Impingement, and Beyond | September 22-24, 2017\$800
- 611 Shoulder Tips & Tricks: Arthroscopy to Rehabilitation | October 6-7, 2017\$800
- 612 Advanced Comprehensive Knee Ligament Course and Related Surgery | October 20-22, 2017\$800

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Questionnaire

Would you like to be paired with a specific physician? Yes No

If so, who? _____

Please list any dietary restrictions: _____

How did you hear about this course? _____

Have you attended any AANA courses at the OLC in the past? Yes No

If you are not a member of AANA, are you interested in joining? Yes No

Payment Information

Credit Card:

Visa MasterCard Discover American Express

Card #: _____ CVV Code: _____ Exp. Date: _____

Signature: _____

Wire Transfer

Please send me instructions to pay by wire transfer. I understand that my registration will not be complete and my spot will not be guaranteed until AANA receives payment.

Check

Check enclosed (please follow the instructions below to mail this form to AANA).

I will send a check separately. I understand that my registration will not be complete and my spot will not be guaranteed until AANA receives payment.

Complete Your Registration

Submit this form by sending it to AANA via email at **Kassie@aana.org**, or by fax at +1 (847) 292-2268, or by post at:

Education

Arthroscopy Association of North America

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Rosemont, IL 60018

USA