Conference Registration - D120328

Comprehensive Board Review in Hematology and Medical Oncology September 16-21, 2019

Last Name	First	MI	Highest Degree
Department (include unit no.)	Specialty		
Institution			
MD Anderson Employee ID No. (required for all MDACC employees):	Physician ☐ Yes ☐ No		
Street			
City	State/Foreign Country/Zip or Mail Code		
Daytime Phone (with area code)	Cell Phone (with area code)	Fax (with area code)	
E-mail Address (please print)			
Emergency Contact	Phone (with area code)		
Credit Card Holder Name (First/Last)	Charge the following: ☐ VISA ☐ MC ☐ AMEX		
Credit Card Number	Expiration Date		
Security Code/CVV/CSV	Credit Card Holder Billing Address & ZIP Code		

MD Anderson Interdepartmental Transfer (IDT) No.: ***Fund Group 90 will not be accepted**

Business Unit	Department	Fund Group*	Fund	Fund Type
Authorized Signature REQUIRED for CREDIT CARD or IDT		IDT Approver Name (First/Last) please print		

CONFERENCE FEES

Postmarked: ..... by 7/27/19.....by 8/23/19....after 8/23/19

Full Conference

- ☐ MDs, PhDs, DOs, PharmDs....$1,300 .....$1,400.....$1,500
- ☐ Residents/Fellows/ MD Anderson Alumni*..... $900 .....$950.....$1,000

Hematology Session Fee (3 days) (Monday - Wednesday)

- ☐ MDs, PhDs, DOs, PharmDs ..... $850 .....$900.....$950
- ☐ Residents/Fellows/ MD Anderson Alumni*..... $600 .....$650.....$700

Oncology Session Fee (4½ days) (Tuesday afternoon - Saturday)

- ☐ MDs, PhDs, DOs, PharmDs ..... $950 .....$1,000.....$1,050
- ☐ Residents/Fellows/ MD Anderson Alumni*..... $800 .....$850.....$900

- ☐ Advanced Practice Providers/Nurses/ Advanced Practice Nurses*..... $450
- ☐ MD Anderson/Baylor Faculty/Staff... $500
- ☐ MD Anderson/Baylor Clinical Fellows*Exempt

* A letter of introduction from the program director or chairperson with registration form is required to claim this reduced fee.

Make check or money order payable to:
The University of Texas MD Anderson Cancer Center.

THIS IS NOT A SELF-MAILER - Address to:
Comprehensive Board Review in Hematology and Medical Oncology
CME/Conference Management – Unit 1781
The University of Texas MD Anderson Cancer Center
PO Box 301407, Houston, TX 77230-1407 or fax to 713-794-1724