REGISTRATION FORM

2020 Annual Convention and Scientific Sessions

A virtual event OCTOBER 21-24

#**ACOI**2020

Full Name		
Preferred Name on Badge	AOA Number	
Mailing Address		
City	State Zip	
Work Ph. () Cell	Phone ()	
Home Ph. () E-Mail Address		
Medical Specialty/Subspecialty		
Preferred Name of Spouse/Guest on Badge		
Emergency Contact		
Relation Teleph	none ()	
NOTE: TO COMPLETE THE FORM BELOW, ENTER ALL REGISTRATION FEES FROM OPPOSITE SIDE. SEE REGISTRATION INFORMATION SHEET FOR COMPLETE EXPLANATION OF PROGRAMS AND FEES.		
REGISTRATION PAYMENT		
SPOUSE REGISTRATION		
*GAF (Generational Advancement Fund): ACOI provides each resident and student in attendance with a medical textbook. The College also provides grants to medical students via their campus internal medicine clubs. Suggested Donation: □\$1000 □\$500 □\$250 □\$200 □\$150 □\$125 □\$100 □\$50 □Other\$ *Your donation to GAF may qualify as a tax deductible charitable contribution. ACOI is a 501(c)(3) organization and no goods or services are provided in return for the contribution. A separate receipt will be provided for your records. TOTAL FEES ENCLOSED\$		
	Credit Card Security #	
Credit Card Number	Credit Card Exp. Date	
Name on Card Sign	nature	
CHECK HERE IF BILLING ADDRESS IS SAME AS MAILING ADDRESS LISTED ABOVE. IF NOT, PLEASE PROVIDE BELOW		
Billing Address		
City	State Zip	
NOTE: All registrations must be accompanied by a check for navment in full or appropriate credit card information. A r	processing fee of \$100 will be charged for cancellations received at any time. In	

order to obtain a refund, written cancellations must be received by September 21, 2020. No refunds will be made after that date, but registration fees may be applied to a future ACOI education activity.

OVER...More registration information on reverse side. Both sides must be completed for form to be processed. You may also register online at www.acoi.org



ACOI CONVENTION REGISTRATION FORM

Please complete all areas on both sides of registration form. Payment must accompany all registrations. PLEASE PRINT CLEARLY!

Name_

AOA Number___

REGISTRATION FEES

REGISTRATION CATEGORY (please check appropriate box(es))	ON/BEFORE SEPT 21	AFTER SEPT 21
□ ACOI Member (Training completed PRIOR to 6/30/2015)	\$795	\$845
□ ACOI Young Internist Member (Training completed AFTER 7/01/2015)	\$645	\$695
ACOI Retired/Emeritus Member	\$645	\$695
□ Non-Member Physician	\$995	\$1045
□ Resident/Fellow (List Training Institution)	\$100	\$100
☐ Resident/Fellow Displaying a Poster (List Training Institution)	\$100	\$100
☐ Student (List Osteopathic College attended)	N/C	N/C
□ Non-Physician Health Care Professional (RN, PhD, RD, etc.)	\$795	\$845
Spouse/Guest Registration	\$125	\$175
EVENTS		
☐ Alumni Reception Des Moines University 10/22/2020 5:30pm-7:30pm	N/C	N/C
□ Alumni Reception Lincoln Memorial University 10/22/2020 5:30pm-7:30pm	N/C	N/C
□ Alumni Reception Midwestern University/CCOM/AZCOM 10/22/2020 5:30pm-7:30pm	N/C	N/C
□ Alumni Reception MSUCOM 10/22/2020 5:30pm-7:30pm	N/C	N/C
☐ Alumni Reception RowanSOM 10/22/2020 6:00pm-7:00pm	N/C	N/C
☐ Alumni Reception Botsford Hospital 10/22/2020 5:30pm-7:30pm	N/C	N/C

SPECIAL NEEDS: In accordance with the Americans with Disabilities Act, every effort has been made to make this conference and activities accessible to people of all capabilities. Please list specific special assistance needed or contact Susan Stacy at susan@acoi.org.

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