ORTHOPAEDIC TRAUMA ASSOCIATION'S

2008 COMPREHENSIVE FRACTURE COURSE FOR RESIDENTS

October 15 - 18, 2008

Colorado Convention Center — Denver, Colorado, USA

**Registration fee includes breakfasts, lunches, course syllabus, 12 hands-on labs, and OTA Welcome Reception.*

REGISTRATION FORM

Please type or print
Register on-site after October 1, 2008

Course limited to 140 residents. Participants chosen on a first-come, first-served basis. Register Early!

Name _____

Address _____

City _____ State _____ Zip _____

Phone (___) _____ Fax (___) _____ E-mail: _____

Registration Fees:

If received *on or before* October 1, 2008		$725.00 (U.S.)	$ _____
On-site Registration *after* October 1, 2008		$775.00 (U.S.)	$ _____
Thursday Night Reception	❑ I will attend	$ 0.00 (U.S.)	$ *no charge for resident*
Additional Guest(s) at the Thursday Night Reception	qty: _____	$ 60.00 (U.S.)	$ _____

Guest Names(s): _____

Amount Enclosed $ _____

❑ Cash ❑ Check

❑ Visa ❑ Mastercard

Card Number Exp. Date: _____

Signature: _____

Credit card registrations may be faxed to 847-823-0536.

- I am a ❑ PGY 2 ❑ PGY 3 ❑ PGY 4 Resident ❑ Other: _____
- ❑ Check here if ADA (Americans with Disabilities Act) accommodations are desired

  Please specify: _____

Refund Policy: Written notice of cancellation must be sent before October 1, 2008 for a full refund. Cancellations received after October 1, 2008 are subject to a $50.00 processing fee.

NO REFUNDS AFTER OCTOBER 8, 2008

Allow two weeks for registration confirmation. **Questions: (847) 698-1631**

Return completed registration form and check in U.S. funds to:
OTA 6664 Eagle Way Chicago, IL 60678-1066 USA
Credit card registrations may be faxed to: (847) 823-0536

☛ **IMPORTANT:** *Don't pay twice for this event!*
Avoid duplicate charges — do NOT mail previously faxed registration form.

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