

# REGISTRATION FORM

Yes! I will attend the FSMB's 98th Annual Meeting April 22 - 24, 2010

First Middle Last

- M.D.  D.O.  J.D.  Esq.  Ph.D.  P.A.  
 Other \_\_\_\_\_

Specialty \_\_\_\_\_

Name (as you want it to appear on badge) \_\_\_\_\_

Board/Organization \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Business Phone/Fax \_\_\_\_\_

E-mail \_\_\_\_\_

## Check All That Apply

### State Medical Board Members

- Physician Member  Public Member  Board Chair/President  
 Other \_\_\_\_\_

### State Medical Board Staff

- Executive  Investigator  
 Medical Director  Board Attorney  
 Medical Consultant  
 Other \_\_\_\_\_

### Additional Information

- First Time Attendee  
 FSMB Board of Director  
 FSMB Past President/Chair  
 Faculty/Speaker  
 International Attendee  
 Scholarship (delegate, board executive or designee)

## Hotel Information

The Hyatt Regency Chicago is the host for the 2010 Annual Meeting. Please make your reservations early, as only a limited number of rooms will be available up until the reservation cutoff date of **March 30, 2010**. A limited number of government rooms will also be available on a first-come, first-served basis. The government rate is \$158 per night. Be sure to reference the FSMB Annual Meeting to secure the conference rate. Please make your room reservations directly with the hotel at:

Hyatt Regency Chicago  
151 East Wacker Drive  
Chicago, IL 60601  
(312) 565-1234 (local)  
(312) 239-4414 (fax)

Reservations/Toll Free: (888) 421-1442  
Reservations/Local: (402) 592-6464

FSMB Room Rate: \$216 Sgl/DbI  
These rates are subject to 15.4% tax.

Or make your reservations online at:

[https://resweb.passkey.com/Resweb.do?mode=welcme\\_gi\\_new&groupID=1512041](https://resweb.passkey.com/Resweb.do?mode=welcme_gi_new&groupID=1512041)

## Register

Mail/fax this completed form to:

Federation of State Medical Boards  
ATTN: Education Coordinator  
P.O. Box 619850  
Dallas, TX 75261-9850

Tel: (817) 868-4007  
Fax: (817) 868-4117

## Registration Fee

The registration fee includes admission to all Annual Meeting education sessions, meal functions and receptions. To take advantage of the early registration discount, payment must be postmarked by **March 19, 2010**.

| Registration            | Fee   | Cost     |
|-------------------------|-------|----------|
| Early bird registration | \$425 | \$ _____ |
| On-site registration    | \$575 | \$ _____ |
| One day registration    | \$185 | \$ _____ |
| CME Fee                 | \$75  | \$ _____ |

Subtotal A: \$ \_\_\_\_\_

| Additional Meal Tickets (For guests) | Qty   | Fee  | Cost     |
|--------------------------------------|-------|------|----------|
| FSPHP/FSMB Luncheon Program          | _____ | \$50 | \$ _____ |
| Bierring Dinner                      | _____ | \$75 | \$ _____ |

Subtotal B: \$ \_\_\_\_\_

**Total (A + B)** \$ \_\_\_\_\_

## Payment Method

- My check is enclosed. Please make checks payable to the *Federation of State Medical Boards* and note *2010 Annual Meeting*. If paying for multiple registrations, include a list with the full name of each attendee.

- Please charge my credit card

- Visa  MasterCard

Card #: \_\_\_\_\_

Expiration date: \_\_\_\_\_

Name as it appears on card (please print): \_\_\_\_\_

Signature: \_\_\_\_\_

Receipt of registration will be confirmed within 10 days. Visit our website at [www.fsmb.org](http://www.fsmb.org) for more information on Annual Meeting events and other educational opportunities

## Spouse/Guest Attending Events/Functions

Name(s) of special guest(s) as you want it to appear on name badge(s):

\_\_\_\_\_  
\_\_\_\_\_

## Refund Policy

Cancellations must be in writing. Individuals who cancel before **April 8, 2010** are entitled to a refund of their registration fees, less a \$125 processing charge. No refunds will be provided after this date. Attendees are responsible for canceling all flight and hotel reservations.

Federation of  
**STATE  
MEDICAL  
BOARDS**

Jointly sponsored by:  
**SOUTHWESTERN  
MEDICAL CENTER**