	Physician F	legistratio	n Form
	Required items: Please help us ensure proper fo Please Note: LUNCH and LEARN tickets for Thu sponsoring companies' Exhibit Booths at <u>no ad</u> available on a first-come basis (for physicians o	rsday and Saturday sessions are available o ditional cost. These sessions are limited to	on Thursday and Friday ONLY at
THURSDAY (Check ALL that apply) May 12, 2022	 Thursday Morning — 7:30 AM - 11:30 AM Thursday Early Afternoon 1:00 PM - 3:00 P Please select	tion 🔲 Wound Care Workshop 0 PM - 5:30 PM	cost). – 3:30 PM - 5:30 PM
FRIDAY (Check ALL that apply) May 13, 2022	Friday Late Afternoon 3:00 PM – 5:30 PM Please select Tendon Tr	APMA Breakout Session: 2022 Coding – co lace for lunch (entry by name tag only at no a tions in Bunion Surgery Session: MIPS and OSHA	ontinued dditional cost).
SATURDAY (Check ALL that apply) May 14, 2022	 Saturday Morning Please select for 7:30 AM - 11:30 AM Saturday Afternoon 1:00 PM - 3:45 PM] Trauma and Fractions] Pinnacle Breakout Session: Practicing and S	Succeeding
	Early Bird Special postmarked by Ap	ril 15* Postmarked aft	er April 15 – May 7**
	Early Bird	Afte	er April 15
OHFAMA Member	\$240.00		\$325.00
Student/Resident/LIFE	☐ \$240.00☐ \$50.00		\$325.00 \$50.00
Student/Resident/LIFE MEMBER APMA Member			
Student/Resident/LIFE MEMBER APMA Member Non-Ohio State	□ \$50.00 □ \$325.00		\$50.00 \$375.00
Student/Resident/LIFE MEMBER APMA Member	\$50.00		\$50.00
Student/Resident/LIFE MEMBER APMA Member Non-Ohio State Non-Member DPM	□ \$50.00 □ \$325.00 □ \$500.00 □ \$50.00		\$50.00 \$375.00 \$550.00 \$50.00
Student/Resident/LIFE MEMBER APMA Member Non-Ohio State Non-Member DPM	\$50.00 \$325.00 \$500.00 \$5	must <u>add an additional \$50 on-site registrat</u> ail address where you wish to receive confi form for each registrant.	\$50.00 \$375.00 \$550.00 \$50.00 tion fee. rmation. Registrations will not
Student/Resident/LIFE MEMBER APMA Member Non-Ohio State Non-Member DPM	\$50.00 \$\$325.00 \$\$50.00 \$\$500.00 \$\$500.00 \$\$500.00 \$\$50.00 \$\$50.00 \$**Registration closes on May 7. After May 7, you The contact information should contain the e-m	must <u>add an additional \$50 on-site registrat</u>	\$50.00 \$375.00 \$550.00 \$50.00 tion fee.
Student/Resident/LIFE MEMBER APMA Member Non-Ohio State Non-Member DPM	\$50.00 \$325.00 \$500.00 \$5	must <u>add an additional \$50 on-site registrat</u> ail address where you wish to receive confi form for each registrant.	\$50.00 \$375.00 \$550.00 \$50.00 tion fee. rmation. Registrations will not DEGREE
Student/Resident/LIFE MEMBER APMA Member Non-Ohio State Non-Member DPM	\$50.00 \$325.00 \$500.00 \$500.00 \$500.00 \$500.00 \$500.00 \$500.00 \$Fregistration closes on May 7. After May 7, you The contact information should contain the e-m be processed without payment. Use a separate FIRST NAME MI	must <u>add an additional \$50 on-site registrat</u> ail address where you wish to receive confi form for each registrant.	\$50.00 \$375.00 \$550.00 \$50.00 tion fee. rmation. Registrations will not DEGREE
Student/Resident/LIFE MEMBER APMA Member Non-Ohio State Non-Member DPM	Solution	must <u>add an additional \$50 on-site registrat</u> aail address where you wish to receive confi form for each registrant.	\$50.00 \$375.00 \$550.00 \$50.00 tion fee. rmation. Registrations will not DEGREE ADGE (\$50 REGISTRATION FEE) STATE ZIP
Student/Resident/LIFE MEMBER APMA Member Non-Ohio State Non-Member DPM	Image: State of the state	must <u>add an additional \$50 on-site registrat</u> aail address where you wish to receive confi form for each registrant. LAST NAME I WILL BE BRINGING MY SPOUSE/GUEST. NAME FOR BA CITY EMAIL	\$50.00 \$375.00 \$550.00 \$50.00 tion fee. rmation. Registrations will not DEGREE ADGE (\$50 REGISTRATION FEE) STATE ZIP
Student/Resident/LIFE MEMBER APMA Member Non-Ohio State Non-Member DPM	Image: Second state of the second s	must <u>add an additional \$50 on-site registrat</u> aail address where you wish to receive confi form for each registrant. LAST NAME I WILL BE BRINGING MY SPOUSE/GUEST. NAME FOR BA CITY EMAIL	\$50.00 \$375.00 \$375.00 \$550.00 \$50.00 tion fee. tion fee
Student/Resident/LIFE MEMBER APMA Member Non-Ohio State Non-Member DPM	Image: State in the state	must add an additional \$50 on-site registrat aail address where you wish to receive confiform for each registrant. LAST NAME I WILL BE BRINGING MY SPOUSE/GUEST. NAME FOR BA CITY EMAIL rable to OFAMF) Credit Card American Express	\$50.00 \$375.00 \$375.00 \$550.00 \$50.00 tion fee. Trmation. Registrations will not DEGREE ADGE (\$50 REGISTRATION FEE) STATE ZIP SPECIAL ACCESSIBILITY NEEDS C MY REGISTRATION COST IS \$
Student/Resident/LIFE MEMBER APMA Member Non-Ohio State Non-Member DPM	Image: State of the state	must add an additional \$50 on-site registrat aail address where you wish to receive confiform for each registrant. LAST NAME I WILL BE BRINGING MY SPOUSE/GUEST. NAME FOR B/ CITY EMAIL rable to OFAMF) Credit Card American Express EXPIRATION DATE	\$50.00 \$375.00 \$375.00 \$550.00 \$50.00 tion fee. Trmation. Registrations will not DEGREE ADGE (\$50 REGISTRATION FEE) STATE ZIP SPECIAL ACCESSIBILITY NEEDS C MY REGISTRATION COST IS \$

1960 Bethel Road, Suite 140 Columbus, OH 43220-1815

Or register online at www.ohfama.org