

SUNA uroLogic Conference Registration Form

September 20-23, 2019 | Lake Buena Vista, FL

Name: _____ Credentials: _____

Employer/Organization: _____

Preferred Mailing Address home work _____

City _____ State _____ Zip/Postal Code: _____

Daytime Phone: home work cell (_____) _____

Required attendee email address: _____

To receive your receipt/confirmation, conference updates, and to be used to login for contact hours.

Including this meeting, how many National SUNA Conferences have you attended? 1 2 3 4 5+

I am interested in being a moderator. yes Dietary/Disability need _____

Would you like to have a mentor? yes Would you like to be a mentor? yes

PRECONFERENCE REGISTRATION FEES - September 20, 2019	MEMBER	NONMEMBER	AMOUNT
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010 Pelvic Floor Disorders 7:30 am - 11:45 am	<input type="checkbox"/> \$115	<input type="checkbox"/> \$190	
020 Neuromodulation and Botulinum Toxin 7:30 am - 11:45 am	<input type="checkbox"/> \$115	<input type="checkbox"/> \$190	
030 Urology Procedures 7:30 am - 5:15 pm	<input type="checkbox"/> \$140	<input type="checkbox"/> \$215	
040 Certification Review Course for the APN 7:30 am - 5:15 pm	<input type="checkbox"/> \$140	<input type="checkbox"/> \$215	
050 Imaging 1:00 pm - 5:15 pm	<input type="checkbox"/> \$115	<input type="checkbox"/> \$190	
060 Pessary Use and Management 1:00 pm - 5:15 pm	<input type="checkbox"/> \$115	<input type="checkbox"/> \$190	

MAIN CONFERENCE REGISTRATION FEES - September 21-23, 2019	MEMBER	NONMEMBER	AMOUNT
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Early Fee - on or before 8/22/19	<input type="checkbox"/> \$445	<input type="checkbox"/> \$545	
Regular/Onsite Fee - after 8/22/19	<input type="checkbox"/> \$485	<input type="checkbox"/> \$585	

DAILY REGISTRATION FEES - September 21-23, 2019	MEMBER	NONMEMBER	AMOUNT
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Early Fee - on or before 8/22/19	<input type="checkbox"/> \$215	<input type="checkbox"/> \$250	
Regular/Onsite Fee - after 8/22/19	<input type="checkbox"/> \$230	<input type="checkbox"/> \$265	

Please check the day(s) you plan to attend: Sat Sun Mon

50th Anniversary Celebration (optional) cost per person, attendee and/or guests \$75 \$75

Guest badges (other than attendee) See page 14 for details. **AMOUNT**
 Guest name _____ Exhibit Hall \$50

POST CONFERENCE REGISTRATION FEES - September 23, 2019	MEMBER	NONMEMBER	AMOUNT
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901 Pelvic Muscle Rehabilitation (Limited to 40 participants)	<input type="checkbox"/> \$75	<input type="checkbox"/> \$100	
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MEMBERSHIP	AMOUNT
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Join SUNA for \$85 with registration and select member pricing Join Renew **add \$85**
 Fill out next page and return with registration or complete online. Membership is non-refundable/non-transferable.
 Membership must be valid through September 30, 2019 to qualify for member rates. Current members may renew their membership with their conference registration. Membership will commence upon current expiration.

PAYMENT

Check enclosed payable in US funds to: **SUNA** **Total Amount Enclosed**

<p>OR charge my <input type="checkbox"/> VISA <input type="checkbox"/> Master Card <input type="checkbox"/> American Express</p> <p>_____</p> <p style="text-align: center;">Credit Card Number</p> <p>Exp. Date _____ Security Code _____</p>	<p>Card holder name (please print) _____</p> <p>Credit card billing address _____</p> <p>_____</p> <p>Signature _____</p>
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Please indicate 1st and 2nd choice for all Concurrent sessions. General sessions open to all registered attendees.

SATURDAY September 21	SUNDAY September 22
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<p>CONCURRENT SESSIONS</p> <p>1:30 pm - 2:30 pm 141 ___ 142 ___ 143 ___ 144 ___</p> <p>4:10 pm - 5:10 pm 151 ___ 152 ___ 153 ___ 154 ___</p> <p>SIGs</p> <p>5:15 pm - 6:15 pm 161 ___ 162 ___ 163 ___ 164 ___</p> <p style="padding-left: 100px;">165 ___</p>	<p>CONCURRENT SESSIONS</p> <p>8:25 am - 9:25 am 211 ___ 212 ___ 213 ___ 214 ___</p> <p>1:35 pm - 2:35 pm 241 ___ 242 ___ 243 ___ 244 ___</p> <p>2:45 pm - 3:45 pm 251 ___ 252 ___ 253 ___ 254 ___</p> <p>3:55 pm - 4:55 pm 261 ___ 262 ___ 263 ___ 264 ___</p> <p>5:05 pm - 6:05 pm 271 ___ 272 ___ 273 ___ 274 ___</p>
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For cancellations received in writing by August 22, 2019, a \$75 administrative fee will be assessed and the balance will be remitted to the original form of payment. No refunds will be made after August 22, 2019. Membership fee is non-refundable, non transferable. SUNA reserves the right to cancel programs because of emergencies, labor strikes, acts of God, and insufficient registration or sponsorship.



ONLINE
suna.org



FAX
856-218-0557



MAIL
SUNA Registration
East Holly Avenue/Box 56
Pitman, NJ 08071-0056