COURSE REGISTRATION FORM

21ST ANNUAL LIVER DISEASE WRAP-UP

December 8, 2018

Mail: Michigan Medicine / Department of Internal Medicine CME
24 Frank Lloyd Wright Dr. / Lobby J, Suite 1200 / Ann Arbor, MI 48106-5750

Online: medicine.umich.edu/intmed - *click on the CME Course Calendar button on the left*

Fax: (734) 998-0085

CONTACT INFORMATION

REGISTRANT NAME *(as you would like it to appear on your name tag)*

DEGREE(S): ❑ MD ❑ DO ❑ PhD ❑ PA ❑ NP ❑ RN ❑ Other:

SPECIALTY:

PREFERRED MAILING ADDRESS.....select one ❑ HOME ❑ BUSINESS

ADDRESS

CITY	STATE	ZIP CODE	COUNTRY

CONTACT PHONE NUMBER(S):

❑ CELL / HOME ❑ WORK

EMAIL ADDRESS *(please print clearly)*

SPECIAL ACCOMMODATIONS

COURSE OPTIONS & PAYMENT

COURSE OPTIONS	General Rate	U-M Faculty & Staff	GI Division Faculty & Staff
Full Course	❑ $105	❑ $50	❑ $0 (pre-registration is still required)
Printed Syllabus (go green - electronic syllabus is free)	❑ $15	❑ $15	❑ $15

Enclose a check (U.S. currency) payable to the University of Michigan or pay by credit card below.
Payment must accompany registration.

CREDIT CARD: ❑ AmEx ❑ Discover ❑ MasterCard ❑ Visa

CARD # EXP. DATE SEC. CODE

NAME ON CARD *(please print)*

SIGNATURE *(not valid without signature)*