

**PMMA Registration Form**  
**41<sup>st</sup> Annual Clinical Conference**  
 Hilton Airport Hotel, August 15-18, 2019

**Participant Information**

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Specialty \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_  Home  Office  
 Email \_\_\_\_\_

Payment Information – we are now offering online payment of dues and CME registration.  
 Please visit our website at [www.phmma.org](http://www.phmma.org). E-mail us at [info@phmma.org](mailto:info@phmma.org)

On or before August 11, 2019.

**CME Registration** \_\_\_\_\_ \$ \_\_\_\_\_

- \$350 Physicians, members
- \$400 Physicians, non-members
- \$150 RN, NP, Allied Health Professionals
- \$150 Residents, Retired/Semi-retired physician and nurses (for meals)
- \$100 Medical Students

**Other activities:**

TBA \_\_\_\_\_ No. of attendees \_\_\_\_\_

**Breakfast (for non-registered attendees)** \_\_\_\_\_ \$ \_\_\_\_\_

- \$30 x \_\_\_\_\_ persons = \_\_\_\_\_
- Dinner Dance (for non-registered attendees)** \_\_\_\_\_ \$ \_\_\_\_\_
- \$60 ages 11 and up x \_\_\_\_\_ persons = \_\_\_\_\_
- \$18 ages 4 to 10 x \_\_\_\_\_ persons = \_\_\_\_\_
- FREE ages 3 and below x \_\_\_\_\_ persons

**Membership Dues**

**Membership Dues** \_\_\_\_\_ \$ \_\_\_\_\_

Please select any of the following categories that describe your practice and pay accordingly:

- \$150 Active practice
- \$75 Retired, with part time practice
- \$50 Fully retired
- \$25 For prospective PMMA allied professionals

**Tax Deductible Contribution to PMMA** \_\_\_\_\_ \$ \_\_\_\_\_

PMMA Tax ID # 32-0023-7403

**TOTAL** \_\_\_\_\_ \$ \_\_\_\_\_

Please register online OR send completed registration form and check made payable to PMMA to:  
 Dr. Shoua Theresa Thao Kalugdan, PMMA Treasurer  
 6479 Hedgecroft Ave., S  
 Cottage Grove, MN 55016

For special dietary requests or if registering after August 11, please email [info@phmma.org](mailto:info@phmma.org).