

UBC Radiology Conference Vancouver Imaging Review: Head to Toe

Thursday, September 29 - Sunday, October 2, 2016

Rosewood Hotel Georgia, 801 West Georgia Street, Vancouver, BC, Canada

SPACE IS LIMITED

A confirmation of registration and purchase receipt will be provided electronically.

www.ubcradcme.com

Registration Form

Contact Details

DR. MR. MS. MRS.

(PLEASE CHECK ONE)

FIRST NAME

LAST NAME

MAILING ADDRESS

CITY

PROVINCE/STATE

POSTAL / ZIP CODE

COUNTRY

TELEPHONE

FAX

EMAIL **REQUIRED**

Registration Type

PLEASE INDICATE

Radiologist Technologist Resident Fellow
 Other

Syllabus Format

PLEASE CHOOSE ONE

USB Dropbox

Welcome Cocktail Reception RSVP (Thursday, 5:00 –7:00 PM)

PLEASE INDICATE

I will be attending
 I will be bringing a guest

Special Needs and Dietary Restrictions

The venue is wheelchair accessible. Vegetarian options will be provided at meals. Please indicate any other special needs:

Registration Fees (in Canadian dollars)

Radiologists

Prior to Sept 6, 2016 \$ 895
 After Sept 6, 2016 \$ 1195

Residents, Fellows, Technologists

Prior to Sept 6, 2016 \$ 495
 After Sept 6, 2016 \$ 595

Residents and Fellows are required to provide a letter from their Program Director confirming their status.

Cancellation Policy

Should you need to cancel your registration, you must do so in writing to cpd.info@ubc.ca before August 31, 2016. Your registration fee, less a \$100 handling charge, will be refunded. After August 31, 2016, no refunds will be granted for withdrawal unless a replacement can be secured by the registrant; however, the handling charge will still apply.

The UBC Department of Radiology and the Division of Continuing Professional Development reserves the right to cancel a course thirty (30) days prior to the course date. Each registrant will be notified by telephone, followed by a written notification and a full refund. The University of British Columbia is not responsible for any costs, including, but not limited to, airline or hotel penalties.

Payment

VISA MASTERCARD CHEQUE ENCLOSED (PAYABLE TO UBC CPD)

CREDIT CARD NUMBER

EXPIRY DATE

NAME OF CARDHOLDER

\$

AUTHORIZED AMOUNT

SIGNATURE

Only forms accompanied by full payment will be processed. To ensure course materials are ready for you at the conference, your registration must be received by 4:00pm on **September 16, 2016**.