

# NORTHEASTERN SOCIETY OF PLASTIC SURGEONS

## Spring Workshop

Saturday, March 2, 2019

Lotte New York Palace Hotel, New York, NY

Pre-Registration Deadline: March 1, 2018

### REGISTRATION FORM

Please Print Clearly Or Type

Name: \_\_\_\_\_

Institution: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

### REGISTRATION FEES

		Pre-Registration	Onsite
A. _____	NESPS Member	\$ 100	\$150
B. _____	Non-Member	\$ 300	\$350
C. _____	Resident	\$ 40	\$65

<b>TOTAL AMOUNT DUE:</b> \$ _____
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### METHOD OF PAYMENT

Please charge my registration fees to the following credit card:



Name As It Appears on Credit Card: \_\_\_\_\_

Billing Address of Card Holder:  Same as Above or \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ / \_\_\_\_\_

Security Code: \_\_\_\_\_ (See card images below) Where is your Card Security Code? Your credit card's security code is a 3- or 4- digit number located on its front or back of your credit card



Signature: \_\_\_\_\_

I would like to pay by check (enclosed).

Please make checks payable to:

NESPS 500 Cummings Center Suite 4400 Beverly, Massachusetts 01915

Phone: 978-927-8330 Fax: 978-524-0461

All requests for cancellations must be received in writing. If a written request of cancellation is received at the Society's Administrative Office prior to Friday, February 18, 2019, the registration fee, less a \$25.00 administrative fee, will be refunded after the meeting.

Refund requests received after February 18th will not be honored.