

# NORTHEASTERN SOCIETY OF PLASTIC SURGEONS

## Virtual Spring Workshop

### Saturday, March 6, 2021

#### REGISTRATION FORM

Please Print Clearly Or Type

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

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

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

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

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

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

#### REGISTRATION FEES

- A. \_\_\_\_\_ NESPS Member \$100  
C. \_\_\_\_\_ Non-Member \$200  
D. \_\_\_\_\_ Resident/Student \$50

TOTAL AMOUNT DUE: \$ _____
-------------------------------

#### 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 20, 2021 the registration fee, less a \$25.<sup>00</sup> administrative fee, will be refunded after the meeting. Refund requests received after February 20th will not be honored.