

# VIRGINIA COLLEGE OF EMERGENCY PHYSICIANS

## 2008

### The In's & Out's of Getting Paid: Optimizing Your Revenue

#### REGISTRATION

- |                          |                      |          |
|--------------------------|----------------------|----------|
| <input type="checkbox"/> | VACEP MEMBER         | \$239.00 |
| <input type="checkbox"/> | PHYSICIAN NON-MEMBER | \$279.00 |
| <input type="checkbox"/> | ALL OTHERS           | \$149.00 |

*Registration fee includes course handbook, break refreshments and lunch*

Name

Address

Company/Hospital

Phone

E-mail

#### **Method of Payment**

- |                          |        |                          |            |
|--------------------------|--------|--------------------------|------------|
| <input type="checkbox"/> | Check* | <input type="checkbox"/> | MasterCard |
| <input type="checkbox"/> | Visa   |                          |            |


Credit Card No.

Expiration Date

Signature



\* MAKE CHECKS PAYABLE TO VACEP AND MAIL TO P.O. BOX 911, NORGE, VIRGINIA 23127-0911

 **FOR INSTANT REGISTRATION USING YOUR CREDIT CARD, CALL OR FAX:**  
800-649-4911 or 757-220-4911  
757-258-3042 FAX  
**WWW.VACEP.ORG**

**CONFIRMATIONS WILL ONLY BE SENT VIA EMAIL**



#### **CANCELLATION POLICY**

**Cancellations and requests for refunds must be submitted in writing and received by 6/30/08. Substitutions are acceptable.**