

# A Focused VISION 2008



MEETING REGISTRATION FORM  
JUNE 27-29

Please print. Make copies for additional registrants.

### Registrant Information

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

First Name for Badge \_\_\_\_\_  Physician  Technician  Administrator

Practice \_\_\_\_\_

Street/P.O. Box \_\_\_\_\_

City \_\_\_\_\_ State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

#### Golfing

Yes. I/We want to play golf. (Please call the Pro Shop at (304) 269.8885 to schedule your tee time.)

Attending Spouse/Guest Name \_\_\_\_\_

#### Mail Registration To:

**WVAO**  
2110 Kanawha Boulevard  
Suite 220  
Charleston, WV 25311

#### Fax Registration To:

(304) 344.4139

#### Room Reservations:

**Stonewall Resort**  
1(800) 624.6070

#### Contact for Questions:

**WVAO**  
Wanda Hymes  
(304) 343.5842  
wanda.hymes@wvmtg.org

Registration (by June 13, 2008)	Fee	Subtotals
<b>Physician</b> Registration	_____ x \$350 Member	\$ _____
	_____ x \$450 Non-Member	\$ _____
<b>Technician</b> Registration	_____ x \$150	\$ _____
<b>Administrator</b> Registration	_____ x \$150	\$ _____
<b>Total</b>		\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>

#### CANCELLATION POLICY

ancellations by June 13, 2008 will receive a full refund of the registration fee, less \$55 for processing. No refunds after June 13, 2008, 5:00pm EST.

#### Payment

Personal Check in the amount of \$ \_\_\_\_\_ Check # \_\_\_\_\_  
Make check payable to West Virginia Academy of Ophthalmology (WVAO)

Credit Card Type:  MasterCard  VISA

Card Number \_\_\_\_\_ 3 digit security code from back of card

Expiration Date \_\_\_\_\_ Amount Approved \_\_\_\_\_

Cardholder Name \_\_\_\_\_

Billing Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Home Telephone \_\_\_\_\_ Business Telephone \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

NOTE: Your credit card will be billed through Regional Eye Associates.