

# SUNA Advanced uroLogic Registration Form

March 21-23, 2019 | Chicago, IL

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

Employer/Organization: \_\_\_\_\_

Preferred Mailing Address:  home  work \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Daytime Phone:  home  work  cell (\_\_\_\_\_) \_\_\_\_\_

Email Address (Required): \_\_\_\_\_

*To receive your receipt/confirmation, conference updates, and to be used to login for contact hours.*

Including this meeting, how many National SUNA Conferences have you attended?  1  2  3  4  5+

Dietary/Disability need? \_\_\_\_\_

PRECONFERENCE REGISTRATION FEES — March 21, 2019		MEMBER	NONMEMBER	AMOUNT
010 Pelvic Muscle Rehabilitation 7:15 am - 11:30 am		<input type="checkbox"/> \$75	<input type="checkbox"/> \$100	
MAIN CONFERENCE REGISTRATION FEES — March 21-23, 2019		MEMBER	NONMEMBER	AMOUNT
Early Fee - on or before 2/14/19		<input type="checkbox"/> \$395	<input type="checkbox"/> \$480	
Regular/Onsite Fee - after 2/14/19		<input type="checkbox"/> \$425	<input type="checkbox"/> \$510	
DAILY REGISTRATION FEES — March 21-23, 2019		MEMBER	NONMEMBER	AMOUNT
Early Fee - on or before 2/14/19 <input type="checkbox"/> Thursday		<input type="checkbox"/> \$105	<input type="checkbox"/> \$145	
Early Fee - on or before 2/14/19 <input type="checkbox"/> Friday or <input type="checkbox"/> Saturday		<input type="checkbox"/> \$205	<input type="checkbox"/> \$245	
Regular/Onsite Fee - after 2/14/19 <input type="checkbox"/> Thursday		<input type="checkbox"/> \$125	<input type="checkbox"/> \$165	
Regular/Onsite Fee - after 2/14/19 <input type="checkbox"/> Friday or <input type="checkbox"/> Saturday		<input type="checkbox"/> \$225	<input type="checkbox"/> \$265	
MEMBERSHIP				AMOUNT
Join SUNA for \$75 with registration and select member pricing <input type="checkbox"/> Join <input type="checkbox"/> Renew			add \$75	
Complete online application and return with registration. Membership must be valid through March 23, 2019 to qualify for member rates. Current members may renew their membership with their conference registration. Membership will commence upon current expiration.				
PAYMENT				AMOUNT
Check enclosed payable in US funds to: SUNA		Total Amount Enclosed		
OR charge my <input type="checkbox"/> VISA <input type="checkbox"/> Master Card <input type="checkbox"/> American Express		Card holder name (please print) _____		
_____ Credit Card Number		Credit card billing address _____		
Exp. Date _____ Security Code _____		Signature _____		
FRIDAY, March 22				
Concurrent Sessions (select one in each time slot)				
10:30 am - 11:30 am		211	212	
11:35 am - 12:35 pm		221	222	

For cancellations received in writing by February 25, 2019, a \$75 administrative fee will be assessed and the balance will be remitted to the original form of payment. No refunds will be made after February 25, 2019. Membership fee is non-refundable, non transferable. SUNA reserves the right to cancel programs because of emergencies, labor strikes, acts of God, and insufficient registration or sponsorship.

## 3 Ways to Register



**ONLINE**  
www.suna.org



**FAX**  
856-218-0557



**MAIL**  
SUNA Registration  
East Holly Avenue/Box 56  
Pitman, NJ 08071-0056