

# Registration Form

**Bascom Palmer Eye Institute**

**XL Inter-American Course in Clinical Ophthalmology**

**November 4-7, 2018, DoubleTree by Hilton Miami Airport, Miami, FL**

*Please return to:*

XL Inter-American Course in Clinical Ophthalmology (Curso)

Continuing Medical Education, 1400 NW 10<sup>th</sup> Avenue, Suite 508, Miami FL 33136

Email: [Curso@med.miami.edu](mailto:Curso@med.miami.edu) Fax: (305) 326-6518

**PLEASE PRINT CLEARLY**

Have you previously attended Curso?  Yes  No Last year you attended \_\_\_\_\_

Check here to register for Tuesday's Optional Visual Electrophysiology Course

\_\_\_\_\_  
Last Name (as you wish it to appear on your certificate) / First Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Province Postal Code Country

\_\_\_\_\_  
Telephone (include country code and city codes)

\_\_\_\_\_  
E-mail Address (confirmations will be sent via email within 14 days)

**Registration Fee**

Received on or before Oct. 12: **US\$575**

Received after Oct. 12: **US\$675**

*\*In case of cancellation by the attendee, registration fee will not be refunded.*

**Form of Payment:**

MasterCard  Visa  American Express

*\*No personal checks or cash please*

\_\_\_\_\_  
Credit card number

\_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
Security Code

\_\_\_\_\_  
Name of cardholder

\_\_\_\_\_  
Signature of cardholder

You will receive confirmation of your registration by e-mail within 14 days. If you do not receive your confirmation, please call ☎(305) 326-6110.