

 Complete registration form online at [www.txrad.org/register.html](http://www.txrad.org/register.html)

**1 Contact & Guest Information**

Please print or type or register online at [www.txrad.org/register.html](http://www.txrad.org/register.html) for instant meeting confirmation

Name: \_\_\_\_\_ MD FACR PhD Other: \_\_\_\_\_  
First Middle Last Designation (Circle appropriate titles above)

Name of Clinic/Practice: \_\_\_\_\_

Preferred Address:  Business  Home \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ E-mail: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Check here if you are disabled and require special assistance

Guest/Spouse Attending?  Yes  No Guest/Spouse Name: \_\_\_\_\_

**2 Registration Fees**

**Note: Your registration fees cover all continental breakfasts and coffee breaks, but NOT the lunches.**

**MEMBER CATEGORIES & FEES**

(Check one)	By Mar 12	After Mar 12
<input type="checkbox"/> Member/Physicist Member	\$250	\$300
<input type="checkbox"/> Retired Member	\$150	\$200
<input type="checkbox"/> Speaker/Resident/Physics Student	no charge	no charge

**NON-MEMBER CATEGORIES & FEES**

(Check one)	By Mar 12	After Mar 12
<input type="checkbox"/> Non-Member Phys./Physicists	\$400	\$450**
<input type="checkbox"/> Non-Member Retired Member	\$300	\$350
<input type="checkbox"/> Non-Member Speaker/Resident/Physics Student	\$100	\$150

**\*\*Signing up for TRS membership before you register can save you money! Simply call the TRS office at (512) 535-4920 for membership information or fill out the membership application at [www.txrad.org/membership.html](http://www.txrad.org/membership.html).**

**3 Specialty & Intended Attendance of Educational Sessions**

Please let us know which sessions & days you plan to attend (check all that apply):

SPECIALTY**	DAY(S) YOU WILL ATTEND
<input type="checkbox"/> Diagnostic Radiology	<input type="checkbox"/> Friday, 3/26/10
<input type="checkbox"/> Radiation Oncology	<input type="checkbox"/> Saturday, 3/27/10
<input type="checkbox"/> Medial Physics	<input type="checkbox"/> Sunday, 3/28/10
<input type="checkbox"/> Resident Program	

**\*\* The specialty selected will determine the maximum number of CME/MEP credits that you are eligible to receive**

**4 CME Lunch & Social Event Fees**

- ▶ Advance registration for social events and CME lunches **is required.**
- ▶ CME lunches are complimentary for speakers and member residents, but special events are complimentary for speakers (only).
- ▶ Please check all events that you will attend and indicate the number of tickets required for each:

	Resident Fee or Other Attendee Fee		Resident Fee or Other Attendee Fee
<input type="checkbox"/> Thurs. Welcome Reception	_____ x \$ _____ or \$0 = \$ _____	<input type="checkbox"/> Sat. CME Lunch	_____ x \$0 or \$25 = \$ _____
<input type="checkbox"/> Fri. Luncheon (CME)	_____ x \$0 or \$25 = \$ _____	<input type="checkbox"/> Sat. Americas Dinner	_____ x \$10 or \$40 = \$ _____
<input type="checkbox"/> Fri. Awards Banquet	_____ x \$20 or \$60 = \$ _____	<b>Subtotal of social event &amp; CME lunch fees: \$ _____</b>	

Please list any special dietary needs: \_\_\_\_\_

**5 Total Meeting Cost**

Registration fees (from section 2): \$ \_\_\_\_\_  
 Subtotal of lunch & event fees (from section 4): \$ \_\_\_\_\_  
**Total meeting fees due with registration form: \$ \_\_\_\_\_**

**Optional Donations**

TRS Foundation Donation: \$ \_\_\_\_\_ (Tax deductible)  
 2009 TRS PAC Donation: \$ \_\_\_\_\_ (Non tax deductible)  
**Total donations: \$ \_\_\_\_\_ (Thanks for your generosity!)**

**6 Method of Payment**

Payment must accompany registration form:  Check (made payable to the Texas Radiological Society)  
 Visa  MasterCard  AmEx Amount to be charged: \$ \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Credit Card Billing ZIP Code: \_\_\_\_\_

**7 Submit Registration to:** Texas Radiological Society, 6705 Hwy. 290 West, Ste. 502-243, Austin, TX 78735  
 Phone: (512) 535-4920, Fax: (512) 535-6320.

