HORTY ⟩ SPRINGER
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ON LOCATION REGISTRATION 2024

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LOCATION – *please fill out a registration form for each <u>location</u> requested*

PAYMENT

$1,695 each for 1-3 attendees - $1,450 for each additional registrant★
★*Attendees must attend the same seminar location and be from the same hospital to receive the discounted rate.*

Credit Card: *(HSME will contact you via phone for CC information.)*   Check Enclosed: *(Please make check payable to HSM Enterprises.)*

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E-Mail Marketing   Brochure   Colleague   Other

ATTENDEE INFORMATION FORM 2024
(Please give full names and titles as you would like them to appear on name tags.)
A unique email address must be used for each individual participant.

_____

Attendee #1 First: MI: Last:

Title: Degree:

★Email:

★*E-mail address will be used to access our conference app, and to receive pre and post course materials*

Seminar:

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Attendee #2 First: MI: Last:

Title: Degree:

★Email:

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Title: Degree:

★Email:

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Attendee #4 First: MI: Last:

  Title: Degree:

★Email:

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  Title: Degree:

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  Title: Degree:

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  Title: Degree:

★Email:

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Attendee #8 First: MI: Last:

  Title: Degree:

★Email:

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Attendee #9 First: MI: Last:

  Title: Degree:

★Email:

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Please fill out a second form if additional attendee information is needed   *info@hortyspringer.com*