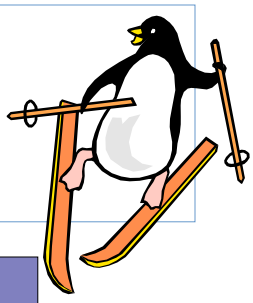
Nevada Osteopathic Medical Association

Embassy Suites Hotel
Lake Tahoe Resort
South Lake Tahoe,CA



18th Annual Winter Medical Symposium

Embassy Suites Hotel
Lake Tahoe Resort

Average Room Rate
$159.00
Single/Double Occupancy
Additional fees for 3 or more.
(code NOM)
1-800-988-9894

Book Before Dec. 15, 2010

NOMA Federal Tax ID Number:
88-1076033

30 hours Primary Care

1-A CME credit

*this program anticipates being approved for the above hours for AOA category 1A CME credits pending approval by the AOA

PRE-REGISTRATION FORM

FULL NAME	☐ D.O. ☐ M.D.
ADDRESS	
CITY/ST/ZIP	
OFFICE TELEPHONE: ( )	HOME TELEPHONE: ( )
AOA NUMBER:	OSTEOPATHIC COLLEGE & YEAR
AREA OF PRACTICE/SPECIALTY:	

REGISTRATION FEES

	NOMA Member	@ $475.00	After December 15	$500.00
	Non Member	@500.00	After December 15	$525.00
	Retired Physician, Resident Intern	@275.00	After December 15	$300.00
	PA's & RN's	@ $250.00	After December 15	$275.00
	Student	no charge		
	TOTAL			

I WISH TO PAY BY:

☐ CHECK (MADE PAYABLE TO NOMA) ENCLOSED FOR: $

☐ Mastercard	CARD #	EXPIRATION DATE:
☐ VISA	SIGNATURE:	SECURITY CODE:

CANCELLATIONS & REFUNDS:
Requests for refunds *MUST* be submitted in writing to NOMA. All requests received will be assessed a $50.00 refund charge.
NO REFUNDS will be made on requests received after December 25, 2010

MAIL or FAX REGISTRATION FORM WITH PAYMENT TO:
NOMA
PO Box 90601
Henderson, NV 89009–0601

Phone: (702) 434-7112
Fax: (702) 434-7110
Email: nvoma@earthlink.net
www.nevadaosteopathic.org