



Oklahoma Academy of Ophthalmology 2019 Codequest Registration

Oklahoma City – Saturday, March 9

In conjunction with the American Academy of Ophthalmic Executives

1: Registration & Fees (check one registrant category):

		By March 1	After March 1	Total
<input type="checkbox"/>	OAO Member and/or Staff	\$320 x ____	\$375 x ____	\$
<input type="checkbox"/>	Resident Ophthalmologist	Free!	Free!	\$
<input type="checkbox"/>	Non-Member Ophthalmologist and/or Staff	\$450 x ____	\$475 x ____	\$
<input type="checkbox"/>	<i>New Members! See Special Offer*</i>	\$320 x ____	\$375 x ____	\$

*Turn in a member application along with 2019 dues, and you and your entire staff may attend Codequest at the member rate.

2: Name of Ophthalmologist associated with this registration: _____

3: Registrant Listing (please complete all lines for each registrant for continuing ed. purposes; attach roster for additional names):

Full Name & Credentials: _____
 Job Title: _____ Clinic: _____
 Mailing Address: _____
 City/State/Zip: _____
 Phone Number: _____ Email: _____

Full Name & Credentials: _____
 Job Title: _____ Clinic: _____
 Mailing Address (if different from above): _____
 City/State/Zip: _____
 Phone Number: _____ Email: _____

ADA: check here if you need any auxiliary services identified with the Americans with Disabilities Act.

4: Payment

Total due for Codequest registration (from section 1): \$ ____

*NEW Members** check here to include 2018 dues of \$700 (practicing) or \$575 (2nd year in practice) or \$350 (1st year in practice) in this payment.

Method: check payable to OAO VISA MC AMX

Card Number: _____

Expiration Date: _____ CVV #: _____

Name on Card: _____

Complete Billing Address: _____

Return this form to: Mail: Oklahoma Academy of Ophthalmology, 401 w. 15th St., Ste. 825, Austin, TX 78701
 Fax: (512) 370-1637; Online: www.OklahomaEyes.org; Email to exec@OklahomaEyes.org, or call (512) 370-1549.