

Surgical Infection Society Fortieth Annual Meeting

Four Seasons Hotel Denver, CO, USA April 17-20, 2020

Meeting Registration Form

Three Easy Ways to Register!

SIS Tax ID# 31-0987252

Online: sisna.org Fax: 631-368-4466 Mail: Surgical Infection Society, P.O. Box 1278, East Northport, NY 11731

Name				
First	MI	Last	Degre	ee
Institution/Company Affiliation_				
Address				
City	StateZip	Country		
Phone	_Fax			
Email		Twitter Handle		
	Registration Fe	e (payable in U.S. Funds)		
<u>Status</u>	On or Before March 1, 2020	After March 1, 2020		
Member				
SISSIS-E	\$550.00	\$600.00	\$	
Resident	\$425.00	\$475.00	\$	
Fellow in Training	\$425.00	\$475.00	\$	
Medical Student	\$425.00	\$475.00	\$	
Non-Member	\$650.00	\$700.00	\$	
Spouse/Guest	\$100.00	\$100.00	\$	
Spouse/Guest Name				
All attendees and guests must regis Saturday, April 18, 2020, the Presid Plan to attend: Welcome Reception	ent's Dinner, Saturday, April 18, 20	020, and the Annual Banquet, Mo	nday, April 20, 2020.	elcome Reception,
Fian to attend. Welcome Neception	i. TesNO Flesidelit's Dilli	Total Enclosed		
If the last of the second	.1		Ф	
If you have a dietary requirement				
Please check if you require	e ADA accommodations and a st	taff member will contact you.		
ACS Member. If so, ACS	Member #	_		
	<u>Paym</u>	ent Information		
Check: Made payable to The S	urgical Infection Society			
VisaMasterCard - Cre	dit Card Number		Exp. Date	csc
Cardholder Signature:				

Cancellations: Written notification of cancellation must be received by March 17, 2020. A \$50.00 administrative fee will be retained for all cancellations. Refunds will not be given after March 17, 2020.