

MICHIGAN EMERGENCY MEDICINE ASSEMBLY

## JULY 28-31, 2024

**THE HIGHLANDS – BOYNE, HARBOR SPRINGS, MICHIGAN REGISTRATION FORM**

Payment Method:  Check Enclosed  MasterCard  VISA

 American Express

Card # Expiration Date Security Code Billing Zip Code Card Holder’s Signature

NAME ADDRESS

CITY STATE ZIP

Home Business  Cell

PHONE

E-MAIL

Before 06/14/24 After 06/14/24 Before 06/14/24 After 06/14/24

MCEP Physician $600 $625 Nurse/PA/EMT $500 $525  ACEP Physician $610 $635  Resident/Student $100 $125  Physician, Non-Member $700 $725

# PRE-REGISTRATION REQUIRED FOR THE BELOW ADDITIONAL EVENTS

**Opening Reception – Sunday, 7/28/2024, 5:30 – 7:00 p.m. – NO CHARGE**

**Total Number of Adults \_\_\_\_\_\_ Children \_\_\_\_\_\_\_ (please include yourself in total)**

**Annual Meeting/Lunch – Monday, 7/29/2024, 1:15 – 2:30 p.m. – NO CHARGE**

**Please Check if you would like a Vegetarian Meal**

**Abbott Product Showcase – Tuesday, 7/30/2024, 7:30 – 8:20 a.m. – NO CHARGE**

**President’s Banquet – Tuesday, 7/30/2024, 7:15 – 9:15 p.m. – $90/Person**

**Total Number of Adults \_\_\_\_\_\_ Children \_\_\_\_\_\_\_ (please include yourself in total)**

**Number of Vegetarian Meal(s) Needed \_\_\_\_\_\_**

GRAND TOTAL *(Including Registration & Additional Events):* $\_\_\_\_\_\_\_\_\_\_\_

CANCELLATION POLICY: Refunds must be requested in writing. If your written cancellation is received by June 30, 2024, you will receive a full refund minus a $100 processing fee. Cancellations received between June 30, 2024 and July 20, 2024 will receive a 50% refund less a

$100 processing fee. No refunds will be processed on cancellations received on or after July 21, 2024 – no exceptions.

Please complete & return this form to:

## MCEP, 6647 West St. Joseph Hwy. Lansing, MI 48917, PHONE 517-327-5700, FAX 517-327-7530, [mcep@mcep.org](mailto:mcep@mcep.org)

## BE SURE TO RETURN BY JUNE 14, 2024 TO RECEIVE EARLY RATES

**ON-LINE REGISTRATION AVAILABLE:**

<https://www.mcep.org/conferences/54-2/>

**Special Accommodations: Please indicate if you require special accommodations in order to fully participate. Attach a written explanation.**