



**6th International Hypothermia and Temperature Management Symposium**

Jefferson Alumni Hall\* 1020 Locust Street\* Philadelphia, PA 19107

**Monday, September 12 - Wednesday, September 14, 2016**

**INSTRUCTIONS:** Please complete this entire form and return it to the Office of CME either via fax or by mail along with payment. If you do not have an account set up in our CPD@JeffLEARN webpage, a profile will be set up for you.

An email will be sent to you with additional instructions on how to access your account.

For additional course information, please access the CPD@JeffLEARN webpage at <https://cme.jefferson.edu/>

Title (Dr, Mr, Ms, Mrs)    First Name    MI    Last Name    Personal Title (II, Jr)

Degree (MD, PhD, BSN, MSN, MBA, etc)    Specialty/Sub Specialty

Company/Organization Name    Position/ Job Title

Address    City    State    Zip Code    Country

Mobile Phone Number\*    Country Code    Other Phone    Email Address

\*your mobile phone number will not be disseminated and is only intended to record attendance at selected activities.

**FOR PHYSICIANS ONLY:** NPI# \_\_\_\_\_ State Licensure # (only 1 state needed) \_\_\_\_\_

**Registration Fees - \*Registration Deadline is: September 7, 2016\***

Regular Registration (May 28 - September 4)	Late Registration (After September 4)
<input type="checkbox"/> \$825 Practicing Physician	<input type="checkbox"/> \$900 Practicing Physician
<input type="checkbox"/> \$375 Nurse or Allied Health Professional	<input type="checkbox"/> \$375 Nurse or Allied Health Professional
<input type="checkbox"/> \$100 Resident and Fellow Rate*	<input type="checkbox"/> \$100 Resident and Fellow Rate*
<input type="checkbox"/> \$175 One Jefferson (Center City Campus, Methodist, Abington and Aria Faculty & Staff)	<input type="checkbox"/> \$175 One Jefferson (Center City Campus, Methodist, Abington and Aria Faculty & Staff)
<input type="checkbox"/> \$1,500 Industry Professional	<input type="checkbox"/> \$1,500 Industry Professional
*Please contact the Office of CME at <a href="mailto:jeffersoncme@jefferson.edu">jeffersoncme@jefferson.edu</a> or 215-955-6992 if you are a Jefferson Resident or Fellow for a discounted rate.	

**GROUP DINNER:**

Please select an option below for the group dinner on September 13, 2016. Dinner tickets are \$125 per person.

- \$125 1 Dinner Ticket- Entrée Selection (circle one) - Beef, Salmon, Vegetarian. Name of guest: \_\_\_\_\_
- \$250 2 Dinner Tickets- Entrée Selection (circle one) - Beef, Salmon, Vegetarian. Name of guest: \_\_\_\_\_
- \$375 3 Dinner Tickets- Entrée Selection (circle one) - Beef, Salmon, Vegetarian. Name of guest: \_\_\_\_\_
- I will not be attending the group dinner.



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HEALTH IS ALL WE DO

**To register please use one of the following options, based on payment method.** Registration will **not** be processed unless full payment is received.

**CHECK:** Please make check payable to **SKMC at TJU, Office of CME**. Do not send cash.

**Mail to:** Hypothermia Symposium - Office of CME; 1020 Locust Street, Suite M-5; Philadelphia, PA 19107

Check is enclosed. Check Number: \_\_\_\_\_

**Credit Card:** If paying by credit card, we suggest you register online (<https://cme.jefferson.edu>). However, you may fax this form with credit card payment to (215) 923-3212.

I hereby authorize use of my:  Visa  MasterCard Amount \$ \_\_\_\_\_

Account Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_ Cardholder's Signature: \_\_\_\_\_

**Billing address (if different from above):** \_\_\_\_\_

**Please do not include me in upcoming events mailing lists.**

For more information, please call the Office of CME at 1-888-JEFF-CME or 215-955-6992

*If you have any special needs, please contact the CME Office by September 1, 2016 at 1-888-JEFF-CME or 215-955-6992.*

### ***Cancellations/Refund Policy***

**Requests for refunds must be submitted in writing and received in the Office of CME by August 12, 2016.** There will be no refunds after this date.\* Cancellations notified before August 12, 2016 will incur a 25% administration fee. Registrants who fail to attend the conference are responsible for the entire fee. All refunds will be processed after the conference. The University reserves the right to cancel or postpone this course due to unforeseen circumstances. In the event of cancellation or postponement, the University will refund registration fees, but is not responsible for related costs or expenses to participants, including cancellation fees assessed by hotels, airlines or travel agencies. Requests for refunds can be sent via email to [jeffersoncme@jefferson.edu](mailto:jeffersoncme@jefferson.edu). Please note "*International Hypothermia and Temperature Management Symposium - Refund*" in the subject line.

\*Registration fees will be refunded less a 15% administration fee to international conference registrants who are unable to secure a travel visa. Registrants must provide proof of visa denial.

You can also send your request to our office at Sidney Kimmel Medical College at Thomas Jefferson University, Office of CME, 1020 Locust Street, Suite M5, Philadelphia PA 19107.

**For more information regarding the course, please visit the course webpage: <https://cme.jefferson.edu/content/IHS2016>**