EVIDENCE-BASED
DRUG THERAPY UPDATE
MAY 14-15 2020 | CROWNE PLAZA HOTEL
4831 TANGER OUTLET BLVD, NORTH CHARLESTON, SC

By Registering for this conference, you acknowledge and agree to the cancellation policy stated below.

Name ___________________________________________ Personal ID# XXX - XX -
(As you would like it printed on your name badge) (Last four digits of your SSN)

Address _______________________________________________

City _____________________________ State ___________ Zip ___________

Specialty ___________________________ Degree/Credentials ___________________________

Email ___________________________________________________
(Please provide your active email address to ensure proper receipt of all CME Credit documentation.)

Phone (______) ___________ - ___________ Fax (______) ___________ - ___________

PLEASE READ THE STATEMENTS BELOW AND CHECK THE BOX IF YOU AGREE.

☐ I do NOT want my name included on a list of participants to be included in handouts at the conference.

Printed Course Syllabus:

☐ YES, I do want a copy of the printed syllabus for $35.
☐ NO, I do not want a printed copy of the course syllabus.

PLEASE SELECT THE APPROPRIATE RATE(S)

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<tr>
<th>Practicing Physicians</th>
<th>Full Conference</th>
<th>5/14</th>
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<th>NP’s, PAs, RPh, Residents</th>
<th>Printed Course Syllabus</th>
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This fee includes continental breakfasts, coffee breaks, access to online course syllabus and credit processing.

CONFERENCE REGISTRATION MAY BE CHARGED TO:

☐ Enclosed Check Payable to Medical University of South Carolina
☐ MasterCard ☐ Visa ☐ Discover ☐ American Express

Card Number ___________________________ Expiration Date ___________________________

Name as it appears on card

REGISTRATION METHODS
(Please use ONE of these methods to register. Do not mail if previously faxed or telephoned).

• Mail registration form with check made out to “Medical University of South Carolina” or credit card information to Elizabeth Gossen, Office of CME, Medical University of South Carolina, 96 Jonathan Lucas Street, HE221A, MSC 754, Charleston, SC, 29425
• Telephone: (843) 876-1925 – Registration by credit card only
• Fax: (843) 876-1931 – Registration by credit card only
• Online: Visit https://tinyurl.com/2019EBDTU

CANCELLATIONS
A refund will be made upon written request prior to April 14 2020, less a $100 cancellation fee. We reserve the right to cancel the program if necessary. Full registration fees will be refunded for cancelled programs. The University cannot be responsible for reimbursement of airline or other transportation fares, hotel or rental car charges, including penalties.

By registering for this conference, you acknowledge and agree to this cancellation policy.