54th Annual **OB/GYN Spring Symposium**



March 13-14, 2025 • The Hyatt Place • Historic Charleston, SC

By Registering for this conference, you acknowledge	and agree to tl	he cancellation po	olicy stated in this broc	hure.	
Name As you would like it printed on your name badge. (Please Lin	nit Credentials to	7 Characters)	Personal ID# Plea	XXX - XX - ase use the last four digits (of your SSN
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		Bird Fees n or by 1/31/25	Regular Fees Received after 1/31/25		
Physicians in Practice (In-person)	O \$665	110109 1731723	O \$710	1,51,25	
Residents, Nurses, NPs, PAs, CNMs (In-person)	O \$595		O \$655		
*The fee for in-person attendance includes tuition, breaks, online	e syllabus and certi	ficates of attendance			
Payment must accompany registration: Enclosed Check Payable to MUSC O M	1asterCard	O Visa	O Discover	O American E	xpress
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REGISTRATION METHODS (Please use ONE of these methods to register. Do not mail if previously faxed or telephoned).

- Mail: send registration form with check made out to "Medical University of South Carolina" or credit card information to: Office of CME, Medical University of South Carolina, 96 Jonathan Lucas Street, HE 601 Suite A, MSC 754, Charleston, SC 29425

- Telephone: (843) 876-1925 Registration by credit card only
 Email/Scan completed registration form to cmeoffice@musc.edu
 Online: Visit www.musc.edu/cme and select "CME Conferences" on the left hand side, then scroll down to find this activity, select the blue "Register" button, and follow directions as prompted.