

AUPO 2010 Annual Meeting and UAO Registration Form

January 28 - 30, 2010

The Ritz-Carlton ♦ Sarasota, Florida

To register for the 2010 Annual Meeting of the Association of University Professors of Ophthalmology and the University Administrators of Ophthalmology meeting, please complete one registration form for each meeting attendee, excluding Professional and Personal Guests, who may be included on the registration form of their sponsoring member. Please note that the Educating the Educators meeting requires a separate registration form and fee.

AUPO

Dept. 34069
P.O. Box 39000
San Francisco, CA 94139

(415) 561-8548
FAX (415) 561-8531
aupo@aao.org | www.AUPO.org

AUPO
655 Beach Street
San Francisco, CA 94109

Name _____ Degree(s) _____

Institution & Address _____

City/State/Zip _____

Phone _____ FAX _____ E-Mail _____

Spouse/Personal Guest (Name to appear on badge): _____

	By January 5, 2010	After Jan. 5/On-site
<input type="checkbox"/> AUPO Member (Chair of Department)	\$550	\$625
<input type="checkbox"/> Professional Guest (1 guest per Member) Member Sponsor _____	\$550	\$625
<input type="checkbox"/> AUPO Associate Member (Program Director, Research Director, Med. Student Educator)	\$550	\$625
<input type="checkbox"/> AUPO Administrator (Member – dues must be paid for 2010) (Includes Wednesday and Thursday Social Events and Friday Banquet)	\$495	\$545
<input type="checkbox"/> Administrator (Non-Member – includes 2010 membership dues) (Includes Wednesday and Thursday Social Events and Friday Banquet)	\$690	\$740
<input type="checkbox"/> AUPO & UAO Spouse/Personal Guest Annual Meeting and Reception (Includes Continental Breakfasts, Breaks, Friday Banquet - Does not include Administrators' Wednesday & Thursday events)	\$200	\$200
<input type="checkbox"/> UAO Social Activities for Spouse/Personal Guest Administrator's Wednesday Cocktail Reception and Thursday Social Activity (Open to Administrator's spouse/guest only)	\$95	\$110

Total amount enclosed \$ _____

No registration will be processed without payment.

AUPO Tax Identification Number 42-6130779

UAO Administrator's Tax Identification Number 65-0024013

I am interested in attending the following **Workshop/Discussion Group** on **Saturday, January 30th**:

Resident Research Workshop

RRC Workshop

New Chairs Workshop

Total number of persons attending **AUPO Reception and Banquet** on **Friday, January 29th**: _____ (MUST be registered for Meeting)

METHOD OF PAYMENT:

No Registration will be processed without correct payment.

Check/Money Order Enclosed (made payable to: **AUPO**)

VISA

MasterCard

Card # _____ Exp. Date (mo/yr) _____

Cardholder's Name _____

Cardholder's Billing Address (if different from above address): _____

Address _____ City, State, Zip _____

• Meeting materials will be available at the AUPO Registration Desk at The Ritz-Carlton, Sarasota, from Wednesday-Saturday, January 27 - 30, 2010.

• Requests for REFUNDS must be in writing and received at the AUPO office by **January 9, 2010, 5:00 pm PST** and are subject to a \$75 administrative fee.

DEADLINE FOR RECEIPT OF PREREGISTRATION FEES IS January 5, 2010.