

Conference Proof of Attendance Sheet & CME/CEU Registration

I attended the following courses:

Please place a check mark in the box for each session you attended. Print and sign at the bottom.

Thursday Track A 9:00-10:00 AM	Thursday Track A 10:10-11:10 AM	Thursday Track A 11:20-12:20 PM	Thursday Track A 2:00-3:00 PM	Thursday Track A 3:10-4:10 PM	Thursday Lunch & Presentation 12:30-1:45 PM
Thursday Track B 9:00-10:00 AM	Thursday Track B 10:10-11:10 AM	Thursday Track B 11:20-12:20 PM	Thursday Track B 2:00-3:00 PM	Thursday Track B 3:10-4:10 PM	
Thursday Track C 9:00-10:00 AM	Thursday Track C 10:10-11:10 AM	Thursday Track C 11:20-12:20 PM	Thursday Track C 2:00-3:00 PM	Thursday Track C 3:10-4:10 PM	
Friday Regina E. Herzlinger 8:45-10:15 AM	Friday Robert Cimasi 10:40-11:10 AM	Friday John Schneider 11:15-11:45 AM	Friday Panel Presentation 1:15-2:15 PM	Friday AMA 2:15-2:45 PM	Friday Randy Fenninger 3:25-4:00 PM
Saturday Track A 8:00-9:00 AM	Saturday Track A 9:10-10:10 AM	Saturday Track A 10:20-11:20 AM	Saturday Track B 8:00-9:00 AM	Saturday Track B 9:10-10:10 AM	Saturday Track B 10:20-11:20 AM
Saturday Track C 8:00-9:00 AM	Saturday Track C 9:10-10:10 AM	Saturday Track C 10:20-11:20 AM			

CME/CEU Registration

(please print)

Name/Degree _____

Specialty _____

Address _____

City _____

State _____ Zip _____

Phone _____

E-mail Address _____

Date _____

I certify that I have completed this CME activity as designed

I am claiming that I participated in _____ credit hours of this CME activity (maximum for this activity is 13.25 hours).

(Rule of thumb for CME hours: 15 minutes = .25 CME hours)

Signature _____ Date _____