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**Faculty Disclosure**  
 The Emergency Medicine Learning & Resource  
 Center adheres to ACCME standards regarding  
 industry support of continuing medical education,  
 and the disclosure of faculty and commercial  
 sponsor relationships (if any) will be made known  
 during the educational activity. Faculty are  
 expected to openly disclose inclusion of  
 discussion on any off-label, experimental or  
 investigative use of drugs, devices, or equipment  
 or any commercial sponsorship.  
 relations in their presentations.



\*Denotes Preconference Faculty.

## DISASTER 2007 CONFERENCE REGISTRATION FORM



First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_ Suffix \_\_\_\_\_

Title \_\_\_\_\_ Agency \_\_\_\_\_ Mailing Label Promotion Code \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Type of License \_\_\_\_\_ State of License \_\_\_\_\_ License # \_\_\_\_\_ Exp. Date \_\_\_\_\_

(License Information Required to receive CME's/CEU's) \_\_\_\_\_ National Registry # \_\_\_\_\_ Exp. Date \_\_\_\_\_

### Registration Fee Schedule *Check only one if applicable* Before or on January 12, 2007

- \$350 - Registration (Conference only)
- \$320 - 3 or more from 1 agency (each)
- \$320 - ACEP Disaster Section Member
- \$175 - General Conference One Day
- \$225 - FCEP Member (Conference only)

### After January 12, 2007

- \$380 - Registration (Conference only)
- \$350 - 3 or more from 1 agency (each)
- \$350 - ACEP Disaster Section Member
- \$175 - General Conference One Day
- \$225 - FCEP Member (Conference only)

**Indicate if you need a CME/CEU Certificate.**  
 Yes, I need a CME/CEU Certificate.  
 No, I do not need a CME/CEU Certificate.  
 Certificates are printed in advance and can be  
 picked up at the registration desk prior to  
 departure from the conference. If you do not check  
 yes, an onsite certificate will not be available.

**Cancellations and refunds will be made only if  
 requested in writing to the 28th Annual  
 International Disaster Management Conference  
 Registrar. No refunds will be made after January  
 25, 2007. For all cancellations, an administrative  
 fee of \$75.00 will be retained. Registration may be  
 transferred to another individual.**

### Preconferences Fee Schedule

- \$150 - P-1 Hospital Incident Command Systems IV (JCAHO Requirements Compliant)
- \$150 - P-2 Safe Mgmt. of Moving Water and Major Flood Response (NFPA Compliance Course)
- \$100 - P-3 Disaster Considerations for Pediatrics and Special Populations
- \$100 - P-4 Model Curriculum for Training Hospital First Receivers: A Train the Trainer Workshop

### Indicate Tracks Preferred *Check only one track per day*

- Friday**  T-1 Hospital / Public Health  T-2 Medical  T-3 Response
- Saturday**  T-1 Hospital / Public Health  T-2 Nursing Preparedness
- T-3 Planning  T-4 Response

Registration Fee \$\_\_\_\_\_ Preconference Fee \$\_\_\_\_\_ Total Fees Enclosed \$\_\_\_\_\_

Payments accepted by Visa, Mastercard, Check or Purchase Order. *American Express not accepted.*  
**Payment must accompany registration form.**

Make checks payable to EMLRC and mail to 3717 S. Conway Road, Orlando, FL 32812  
 Phone: (407) 281-7396 or (800) 766-6335 Fax: (407) 281-4407 Federal Tax ID #59-3001777  
**Credit card number needed to guarantee registration unless Check or PO accompanies registration form.**

Credit Card Number: \_\_\_\_\_

Credit Card Type:  Visa  Mastercard

Expiration Date: \_\_\_\_\_ Cardholder Name: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_