



**American Osteopathic Association**  
**111th Annual Convention and Scientific Seminar**  
 Monday, October 16– Friday, October 20, 2006 – Las Vegas, NV  
**ADVANCE REGISTRATION—DO CATEGORIES**



AOA No.

(Please Print)

Full Name: \_\_\_\_\_ DO \_\_\_\_\_ Preferred First Name (for badge): \_\_\_\_\_

Business Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Business Telephone No: \_\_\_\_\_ E-mail Address: \_\_\_\_\_ Fax: \_\_\_\_\_

Circle Type of Card: VISA MC AMEX DISCOVER Credit Card No. \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature of Cardholder: \_\_\_\_\_ Name as it appears on card: \_\_\_\_\_

Alumni Luncheon: (Specify college) \_\_\_\_\_ AOA Member?  
 Yes  No

**Guest Names**

(1) \_\_\_\_\_ (4) \_\_\_\_\_  
 (2) \_\_\_\_\_ (5) \_\_\_\_\_  
 (3) \_\_\_\_\_ (6) \_\_\_\_\_  
 (Guests without payment are automatically registered as No Fee guests) Juvenile Guest(s)

**AOA CATEGORIES – SECTION 1**

If you register here, do not register in *Section 2*  
 (No specialty registration in this section)

<input type="checkbox"/> AOA or COA ♦ Member (AOA).....	\$495*
<input type="checkbox"/> AOA or COA ♦ Nonmember (NM).....	\$595*
<input type="checkbox"/> Advocates with tickets (ADV).....	\$85**
<input type="checkbox"/> Advocates without tickets (ADV N)...	NO FEE +
<input type="checkbox"/> Adult Guest with tickets (G-AOA).....	\$85**
<input type="checkbox"/> Adult Guest without tickets (AG).....	NO FEE +
<input type="checkbox"/> Juvenile Guest (JG).....	NO FEE
<input type="checkbox"/> STUDENT (S).....	NO FEE +
<input type="checkbox"/> INTERN (I).....	NO FEE +
<input type="checkbox"/> RESIDENT (R) .....	NO FEE +
Specialty _____	
♦ Canadian Osteopathic Association	

**PARTICIPATING PRACTICE GROUPS – SECTION 2**

If you register here, do not register in *Section 1*  
 (Multiple registrations permitted in this section)

**PHYSICIAN**

**GUEST**

<input type="checkbox"/> Academy of Osteopathy (AAO).....	\$495*	<input type="checkbox"/> \$85**	(G-AAO)
<input type="checkbox"/> Addiction Medicine (AM).....	\$495*	<input type="checkbox"/> \$85**	(G-AM)
<input type="checkbox"/> Allergy and Immunology (AI).....	\$495*	<input type="checkbox"/> \$85**	(G-AI)
<input type="checkbox"/> Dermatology (DER).....	\$495*	<input type="checkbox"/> \$85**	(G-DER)
<input type="checkbox"/> Emergency Physicians (EP).....	\$545^	<input type="checkbox"/> \$135^^	(G-EP)
<input type="checkbox"/> Family Physicians (FP).....	\$495*	<input type="checkbox"/> \$85**	(G-FP)
<input type="checkbox"/> Medical Informatics (MI).....	\$495*	<input type="checkbox"/> \$85**	(G-MI)
<input type="checkbox"/> Neurologists & Psychiatrists (NP)..	\$545^	<input type="checkbox"/> \$135^^	(G-NP)
<input type="checkbox"/> Occupational & Prev Med (OPM)...	\$495*	<input type="checkbox"/> \$85**	(G-OPM)
<input checked="" type="checkbox"/> Pathology (PTH).....	\$495*	<input type="checkbox"/> \$85**	(G-PTH)
<input type="checkbox"/> Pediatricians (PED).....	\$495*	<input type="checkbox"/> \$85**	(G-PED)
<input type="checkbox"/> Physical Med/Rehabilitation (PMR)	\$495*	<input type="checkbox"/> \$85**	(G-PMR)
<input type="checkbox"/> Rheumatology (RH).....	\$495*	<input type="checkbox"/> \$85**	(G-RH)
<input type="checkbox"/> Sclerotherapeutic Pain Management (SPM).....	\$495*	<input type="checkbox"/> \$85**	(G-(SPM)
<input type="checkbox"/> Sports Medicine (SM).....	\$495*	<input type="checkbox"/> \$85**	(G-SM)

**KEY TO SYMBOLS**

- \* Includes tickets for one person to attend the AOA/AAOA Presidents' reception and alumni luncheon only.
- \*\* Includes ticket for one person to attend the AOA/AAOA Presidents' reception.
- ^ Includes tickets for one person to attend the AOA/AAOA Presidents' reception, Alumni luncheon and social function planned by this individual group.
- ^^ Includes tickets for one person to attend the AOA/AAOA Presidents' reception and social function planned by this individual group.
- + Individual tickets for social functions may be purchased through DO-online.org (in advance), or during the convention.

\$

ENTER TOTAL FEE

- CHECK HERE IF ADDRESS IS NEW
- CHECK HERE IF DUES PAYMENT IS ENCLOSED
- MAKE CHECK PAYABLE TO:  
**American Osteopathic Association**

**FOR AOA OFFICE USE ONLY**

Check No.	Amount Received	Date
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**DIRECT QUESTIONS TO: AOA Convention Office – Telephone: (312) 202-8014 – E-mail: [convention@osteopathic.org](mailto:convention@osteopathic.org)**

American Osteopathic Association  
Monday, October 16 – Friday, October 20, 2006 – Las Vegas, NV  
**Advance Registration Instruction Form**

**THOSE WHO MAY REGISTER**

- Members of the American Osteopathic Association, or the Canadian Osteopathic Association, and registrants who attend the Research Conference, their adult guests and children. Other guests as indicated on the “Advance Registration – Other Categories” form.
- Osteopathic physicians who are NOT members of the AOA may register, but are required to pay a fee of **\$595.00** (advance registration). Membership in the Canadian Osteopathic Association may substitute for AOA membership if the doctor is located in Canada. **THIS FEE MUST BE PAID BY NONMEMBERS IN ORDER TO RECEIVE CME LETTER CERTIFYING CREDITS, UPON REQUEST.**

**HOW TO SELECT THE APPROPRIATE REGISTRATION CATEGORY**

Check **APPROPRIATE** categories on the registration form – register in Section 1 **OR** Section 2. The “AOA Categories” (Section 1) is for those who register without a practice designation. The “Practice Group Categories” (Section 2) is for those who register with a Practice Group designation. **If you desire to register with more than one participating affiliated organization**, you may do so. Select more than one category and pay the registration fee for your **PRIMARY CHOICE ONLY**. You will receive an affiliate ribbon for each choice and social function tickets will be issued based upon the registration fee. Also, your name will appear on the attendance roster of each specialty organization selected.

**Regardless of the registration category selected, registrants are entitled to attend ANY of the didactic sessions planned by ANY of the participating organizations.** Although membership in a participating affiliated organization is not a requirement to register for the practice group, AOA membership (or if a doctor is from Canada, Canadian Osteopathic Association membership) is a requirement for registration in ANY of the practice group categories listed, except for those who have paid the **NONMEMBER REGISTRATION FEE** plus the additional “practice group” fee, if applicable.

**PARTICIPATING PRACTICE GROUPS:**

American **Academy of Osteopathy**  
American Osteopathic Academy of **Addiction Medicine**  
American Osteopathic College of **Allergy and Immunology**  
American Osteopathic College of **Dermatology**  
American College of Osteopathic **Emergency Physicians**  
American College of Osteopathic **Family Physicians**  
American Osteopathic Academy of **Medical Informatics**  
American College of Osteopathic **Neurologists and Psychiatrists**

American Osteopathic College of **Occupational and Preventive Medicine**  
American Osteopathic College of **Pathologists, Inc.**  
American College of Osteopathic **Pediatricians**  
American Osteopathic College of **Physical Medicine and Rehabilitation**  
American Osteopathic College of **Rheumatology, Inc.**  
American College of Osteopathic **Sclerotherapeutic Pain Management**  
American Osteopathic Academy of **Sports Medicine**

**GUESTS**

In addition to checking your category, check the category for your guests. Remember, name(s) must be listed to receive a **BADGE**. The member’s registration fee does **NOT** include tickets for anyone other than the member. Guests are to be registered either by paying a fee and receiving tickets, or by **NOT** paying a fee and **NOT** receiving tickets (“No Fee Guests”).

If the member’s guest is to have the same tickets as the member, then check the guest category for the group under which the member is registering and pay the fee indicated. The fee paying **DO** will receive an Alumni Luncheon Ticket; however, the paid guest does **NOT**. Tickets for social functions may be purchased separately through [do-online.org](http://do-online.org) (in advance), or during the convention.

**TICKETS COVERED BY REGISTRATION FEE**

The fees shown on the registration form are followed by symbols to indicate the tickets, which are covered by the fees. To interpret the symbols, see “Key to Symbols.”

**SPECIAL NEEDS**

If you have any special needs, please advise us as soon as possible.

**CANCELLATIONS**

Refunds will be made on cancellations received in the AOA Central Office by mail, e-mail or FAX, (see below) no later than **December 29, 2006**.

**THREE EASY PAYMENT OPTIONS:**



**By Mail**

AOA Convention Registration  
PO Box 3918  
Frederick, MD 21705-3918

Make check payable to: **American Osteopathic Association**



**By Fax** (301) 694-5124



[www.DO-online.org](http://www.DO-online.org)

**Online**

Registration material will be mailed out prior to the convention to those who register in **ADVANCE**. Advance forms must be **RECEIVED NO LATER THAN FRIDAY, SEPTEMBER 15, 2006**. Registrations received after this date will be processed and held **onsite** for pickup. For onsite registrations \$50.00 will be added to the registration fee.

**DIRECT QUESTIONS TO:** AOA Convention Office – 142 East Ontario Street, Chicago, IL 60611 -- Telephone: (800) 621-1773, Ext. 8014 / 8256 or (312) 202-8014 – FAX: (312) 202-8212, E-mail: [convention@osteopathic.org](mailto:convention@osteopathic.org) or [mthompson@osteopathic.org](mailto:mthompson@osteopathic.org)