



WMS CONFERENCE REGISTRATION

July 24-29, 2009

(Please complete a separate form for each registrant.)

Name _____
First MI Last Credentials

First Name to Appear on Badge _____
(if different from above)

Mailing Address _____

City _____ State/Province _____ Zip/Postal Code _____ Country _____

Contact Telephone # _____ E-mail Address _____
Required

WMS Member Yes No* If yes, Member # _____

GENERAL INFORMATION

DATES

Friday – Wednesday, July 24-29, 2009

CONFERENCE LOCATION

Snowmass Conference Center
(adjacent to Silvertree Hotel & Wildwood Lodge)
 Snowmass, Colorado

ENROLL EARLY!

Early registration is strongly encouraged due to limited space availability for the *Wilderness Medicine for the Professional Practitioner* pre-conference and the hands-on workshops.

REGISTRATION FEES

Course tuition includes lectures, all small group sessions, syllabus, continental breakfasts, receptions and Tuesday evening banquet. Please see adjacent Registration Form for a complete listing of fees.

CANCELLATION AND REFUND POLICY

Written notice of cancellation must reach the WMS office before Friday, June 26, 2009 in order to receive a refund, less a \$100.00 service fee. After that date, no refunds will be given. The WMS cannot be responsible for any personal or travel conditions that may prevent attendance at the course.

SPECIAL NEEDS

The Wilderness Medical Society fully complies with the legal requirements of the Americans with Disabilities Act. If you have special needs, please notify the WMS at least three weeks prior to the conference.

QUESTIONS? – BIG OR SMALL

Janice Mancuso, WMS Conference Director
 janice@wms.org
 760-652-5052

WMS STATEMENT ON CONFERENCE FEES

The Wilderness Medical Society is a not-for-profit organization that conducts professional educational meetings as one of the cornerstones of its overall mission. Meetings are extremely expensive to produce. The Society does not establish its fees with the objective of making a profit but, rather it sets them with the explicit goal of breaking even in order to continue to produce conferences. The WMS is extremely cognizant of the increased costs associated with attending meetings for its members and non-member attendees, and it strives to make every educational event worth that cost by providing quality education and cutting-edge information in a collegial setting where you are always able to combine your profession with your passion.

A. CONFERENCE	Before May 15		Before June 26		After June 26		SUBTOTAL
	WMS Member	Non-Member*	WMS Member	Non-Member*	WMS Member	Non-Member*	
Doctoral	<input type="checkbox"/> \$645	<input type="checkbox"/> \$795	<input type="checkbox"/> \$695	<input type="checkbox"/> \$845	<input type="checkbox"/> \$745	<input type="checkbox"/> \$895	A. _____ B. _____ C. included in fee D. _____ E. (_____) credit
Non-Doctoral	<input type="checkbox"/> \$445	<input type="checkbox"/> \$545	<input type="checkbox"/> \$495	<input type="checkbox"/> \$595	<input type="checkbox"/> \$545	<input type="checkbox"/> \$645	
Resident	<input type="checkbox"/> \$350	<input type="checkbox"/> \$425	<input type="checkbox"/> \$400	<input type="checkbox"/> \$475	<input type="checkbox"/> \$450	<input type="checkbox"/> \$525	
Student	<input type="checkbox"/> \$250	<input type="checkbox"/> \$300	<input type="checkbox"/> \$300	<input type="checkbox"/> \$350	<input type="checkbox"/> \$350	<input type="checkbox"/> \$400	

B. PRE-CONFERENCE *(must register for conference)*

Wilderness Medicine for the Professional Practitioner (Fri & Sat) \$395
 Disaster Medicine Pre-Conference: Beyond the Algorithm (Sat) \$135

C. HANDS-ON WORKSHOPS *(all workshops are included in conference registration fee)*

Hands-on workshops have limited space; please pre-register to confirm your enrollment in sessions(s).

Anaphylaxis in the Backcountry	<input type="checkbox"/> Sat-8:00am	<input type="checkbox"/> Sun-1:00pm	<input type="checkbox"/> Tue-3:20 pm
Functional Core Training for the Backcountry	<input type="checkbox"/> Mon-10:00am	<input type="checkbox"/> Wed-10:00am	
Improvised Splints and Litters	<input type="checkbox"/> Tue-1:00pm	<input type="checkbox"/> Wed-7:40am	
Moulage Workshop	<input type="checkbox"/> Sun-1:00pm	<input type="checkbox"/> Mon-7:40am	
Not the Same Old Stretches	<input type="checkbox"/> Tue-3:20pm	<input type="checkbox"/> Wed-7:40am	
Orthopedic Injuries in the Wilderness	<input type="checkbox"/> Sat-8:00am	<input type="checkbox"/> Sun-3:20pm	
Planning and Preparing Food for Expeditions	<input type="checkbox"/> Sun-3:20pm	<input type="checkbox"/> Mon-10:00am	
Prevent and Fix Common Injuries	<input type="checkbox"/> Mon-7:40am	<input type="checkbox"/> Tue-1:00pm	
Tourniquets and Hemostatic Agents	<input type="checkbox"/> Sat-8:00am	<input type="checkbox"/> Wed-10:00am	

D. ADDITIONAL ACTIVITIES

Past Presidents Box Luncheon - Sun, July 26 \$20
 WMS Banquet - Tue, July 28 \$ _____ (# _____ tickets @ \$50 ea)
(one ticket included in registration fee)
 TGR Film Night - Wed, July 29 \$ _____ (# _____ tickets @ \$10 ea)

E. CREDIT – BANQUET TICKET

WMS Banquet - Tue, July 28 \$50 Credit
 If you are unable to attend the banquet, you may receive credit for ticket (at time of registration only).

*F. NON-MEMBERS - SPECIAL INTRODUCTORY OFFER!

We're so confident that you'll appreciate the many benefits of being a Member of the Wilderness Medical Society, that we're offering Non-Member conference attendees a one-year complimentary membership in the WMS. (Membership benefits can be found at wms.org.) Take advantage of this first-time offer by checking "Yes" below. *(This offer is only available to non-members at the time of conference registration and cannot be used for renewal of current or lapsed membership.)*

YES, I accept a one-year complimentary membership!
 NO thanks, I don't want to join the WMS at this time.

TOTAL DUE \$

PAYMENT METHOD

Check payable (US funds) to Wilderness Medical Society
 AMEX Discover Card MasterCard VISA

Acct No. _____

Exp. Date (mm/yy) _____ CSV (3 digits) : _____

Name on Card _____

Signature _____

FOUR EASY WAYS TO REGISTER:

1 ONLINE
 wms.org
 Preferred Method

2 FAX
 801-990-2987

3 PHONE
 801-990-2988

4 MAIL
 WMS Registration
 2150 South 1300 East, Suite 500
 Salt Lake City, UT 84106