

Convention Registration Form

NAAMA 32nd International Medical Convention

[360° Health]

Marrakesh, June 29 - July 4, 2020

<i>Please submit your information as you want it to appear on your name tag</i>					
Main Attendee Name					
Degree		Membership (choose one)	NAAMA Member		Non-Member
Address		City		State, Zip Code	
Phone		Cell Phone		E-Mail	
Companions Names					
Companion 1					
Companion 2					
Companion 3					
Companion 4					
Companion 5					
Registration	Quantity	NAAMA Member Rate	Non NAAMA Member Rate	Local Colleague (Morocco)	Total
Main Attendee		\$350.00	\$550.00	\$25.00	
Companions		\$100.00	\$200.00	\$25.00	
Total Registration					

Please note that all participants over the age of 6 years must register and pay the appropriate registration fee. Participants and spouses or guests who wish to earn CME credit must pay the full convention registration fee as main attendees for members or nonmembers accordingly (\$350 or \$550).

The registration fee entitles individuals to benefit from the discounted group rate for social activities and hotel reservation, access to the scientific sessions, printed materials, coffee breaks and other planned activities.

Total Registration fee must be paid upon form submission.

If you wish to pay by check please print this form and mail with payment to: NAAMA, 2265 Livernois Rd, Ste. 720, Troy, MI 48083.

Checks must be made to NAAMA.

If paying by Credit Card you can e-mail this form to naama@naama.com or fax to 248-457-5036.

Credit Card payments will be charged an additional 4% service fee.

Payment Information (please select one)					
<input type="checkbox"/>	Check payable to NAAMA is enclosed				
<input type="checkbox"/>	Paying by credit/debit card	Card Type: ____ Amex ____ VISA ____ MasterCard ____ Discover (an additional 4% is applicable)			
	Card Number		Expiration Date		CCV
	Name on Card				
	Billing address if different from above				

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