



Shreveport

Louisiana | March 3, 2018

Chairmen: W. Britton Eaves, MD | Craig M. Walker, MD

MULTIDISCIPLINARY ADVANCEMENTS IN THE TREATMENT OF CARDIOVASCULAR DISEASE, PERIPHERAL ARTERY DISEASE AND ENDOVASCULAR THERAPY

Registration Form

All fields required for registration. Please print clearly.

Name (as it should appear on your badge)		Credential (MD, RN, etc.)		Position	
Specialty		Affiliation/Institution			
Street Address		City	State		Zip Code
Email (only one email per person)		Phone (include extension)		Dietary Restrictions	

Payment Information

Payment by Check (Payable to: NCVH Foundation, a 501(c)(3) nonprofit organization. Tax ID# 46-3186713)

Payment by Credit Card: Visa MasterCard American Express Discover

Credit Card Number: _____ Exp. Date: _____ Security Code: _____

Cardholder Name: _____ Signature: _____

Register Today!

Phone | 337.993.7920

Mail | NCVH Foundation

3639 Ambassador Caffery Pkwy, Suite 605

Lafayette, LA 70503

Online | ncvh.org/shreveport

Fax | 337.993.7922

Email | registration@ncvh.org

Registration Rates

\$25	Early Bird		11/03 - 01/26
\$50	Advance		01/27 - 02/23
\$100	Onsite		03/03

Cash, checks, and all major credit cards accepted.



Meeting Location

Shreveport Convention Center

400 Caddo Street

Shreveport, LA 71101

318.841.4000

Overnight Accommodations

Special Rates available on the Accommodations and Travel page at ncvh.org/shreveport.