



Mid-Atlantic

Bethesda, MD | April 01, 2017

Chairmen: Vinay K. Satwah, DO | Craig M. Walker, MD

CLINICAL UPDATES AND ADVANCES IN VASCULAR MEDICINE

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/midatlantic

Fax | 337.993.7922

Email | registration@ncvh.org

Registration Rates

\$25 Early Bird | 12/02 - 03/03

\$50 Advance | 03/03 - 03/24

\$100 Onsite | 04/01

Cash, checks and all major credit cards accepted.



Meeting Location

Bethesda Marriott

5151 Pooks Hill Road
Bethesda, MD 20814
301.897.9400

Reservations: 301.897.9400 and reference
"New Cardiovascular Horizons Foundation"

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