Registration Form Please Print Clearly

fellows, Canadian and other non-US physicians.

Meeting registration and reservations made through the NYU hotel room block entitle each

registrant to: conference syllabus, daily meeting

breakfasts, daily meeting coffee breaks and

welcome reception.

Name	Methods of Payment Check in U.S. Dollars made payable to NYU Department of Radiology Credit Card Payment (see below)
Address	Payment by Credit Card Bill to: Visa American Express
City	
State Zip	Card Member's Name (print carefully)
Day Phone	Card #
	Exp Date: Month/Year/
Fax	Amount to be Charged: \$
E-mail (required for course confirmation)	
Degree Specialty	Signature (required to process)
Subspecialty	Fax Form to: (212) 263-3959
Dietary Restrictions (Please indicate any dietary restrictions on the registra- tion form when you register.)	If Sending Check, Please Mail to: Marisa P. Bruno Department of Radiology 462 First Avenue OBH, C&D, Floor 1, Room 4
Registration Fee Options	New York, NY 10016
(Please check appropriate boxes below)1st Annual Dual Energy CT SymposiumOctober 9-10, 2010□ \$325Registration fee for physician□ \$250Discounted fee*	Confirmation of Course Acceptance: We no longer send out written or faxed confirma- tions. A confirmation receipt will be sent to you by e-mail if you provide your email address clearly. Refund Policy:
Clinical State of the Art Body MRI	If you need to cancel your enrollment, a \$75 ser-
October 11-12, 2010\$625Registration fee for physician\$500Discounted fee	vice fee will be assessed for your tuition paymen if written notice is received at least 30 days ir advance and a \$150 service fee for cancellations made within 30 days. No refunds are possible i written notification is not sent.
I would like to register for BOTH Programs and receive a discounted tuition rate:	Course Cancellation Policy:
\$850 Registration fee for physician \$650 Discounted fee * Discounted fees apply to NYU School of	In the unusual circumstance that this course is cancelled, two weeks' notice will be provided and full tuition refunded. The NYU Post-Graduate Medical School is not responsible for any airfare,
Medicine alumni, M.D.'s employed by the Dept. of Veterans Affairs, full-time active military personnel, technologists, current residents/	hotel or other costs incurred. Educational Needs If there is a specific question or topic relating to

If there is a specific question or topic relating to this course, please submit it on the registration form or on the website when registering online.

In Case of Questions, Contact:

Michelle R. Koplik, Director of CME (212) 263-3936 or michelle.koplik@nyumc.org Marisa P. Bruno, Program Coordinator (212) 263-0724 or marisa.bruno@nyumc.org