

CONTACT INFORMATION

You are encouraged to register online at our secure web site or you may send the completed form by *postal mail only*.

| | |
|-----------------------------------|--------------------------------------|
| NAME _____ | PHONE NUMBER (____) _____ - _____ |
| ADDRESS _____ | APT. or SUITE _____ |
| CITY _____ | STATE _____ |
| ZIP CODE _____ | |
| NURSE ANESTHESIA PROGRAM _____ | GRAD YEAR _____ |
| E-MAIL ADDRESS _____ | |

*Please notify Valley Anesthesia **IMMEDIATELY** of any address change to ensure prompt delivery of your materials.*

REGISTRATION

Please check the desired Review Course site. Registration fee includes the Review & Update Course fee and a 2010 Basic Review Course Manual ("Sweat Book"). **\$695.00**

- | | | | | | | |
|--|---|--|---|---|--|---|
| <input type="checkbox"/> Orlando, FL (Jan 15-17, '10) | <input type="checkbox"/> Philadelphia, PA (March 12-14, '10) | <input type="checkbox"/> Nashville, TN (April 9-11, '10) | <input type="checkbox"/> Dallas, TX (April 23-25, '10) | <input type="checkbox"/> Des Moines, IA (May 28-30, '10) | <input type="checkbox"/> Philadelphia, PA (Sept 10-12, '10) | <input type="checkbox"/> Des Moines, IA (Nov 19-21, '10) |
| <input type="checkbox"/> Minneapolis, MN (Jan 29-31, '10) | <input type="checkbox"/> Cleveland, OH (March 26-28, '10) | <input type="checkbox"/> Nashville, TN (April 16-18, '10) | <input type="checkbox"/> Raleigh, NC (May 14-16, '10) | <input type="checkbox"/> Hartford, CT (June 18-20, '10) | <input type="checkbox"/> Cleveland, OH (Oct 22-24, '10) | |

The number of seats is limited at each site. Many sites fill quickly—register early to reserve your seat!

*You will receive the **2010** Basic Course Manual ("Sweat Book") after its publication in the last quarter of 2009.*

MEMORYMASTER™

MemoryMaster™—Choose *one* (or both) of the following formats:

Note: *Content is IDENTICAL in each format*

2010 Edition prices include shipping, handling, and Iowa sales tax.

Book Format

- | | | |
|--|----------|----------|
| <input type="checkbox"/> With Review Course Registration Discount (Applicable at any time) | \$170.00 | \$ _____ |
| <input type="checkbox"/> Without Review Course Registration Discount | \$290.00 | |

Flashcard Format (3" x 4")

- | | | |
|--|----------|----------|
| <input type="checkbox"/> With Review Course Registration Discount (Applicable at any time) | \$240.00 | \$ _____ |
| <input type="checkbox"/> Without Review Course Registration Discount | \$400.00 | |

*You will receive the **2010 edition** of MemoryMaster™ after its publication, scheduled for late Fall, 2009.*

BILLING INFORMATION

Cash Check VISA MC DISCOVER **TOTAL PAYMENT ENCLOSED** \$ _____

| | |
|-----------------------------------|--|
| NAME ON CARD _____ | BILLING PHONE NUMBER (____) _____ - _____ |
| CARD BILLING ADDRESS _____ | APT. _____ |
| CITY _____ | STATE _____ |
| ZIP CODE _____ | |
| CARD NUMBER ____ - ____ - ____ | EXP. DATE ____/____/____ |

Signature & Date: _____

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