



PRE - REGISTRATION FORM

**CFPOC / FSSAMT EDUCATIONAL CONFERENCE
OCTOBER 30 - 31, 2009, ALTAMONTE SPRINGS HILTON, ORLANDO FLORIDA**

Name _____

Employer _____

Address _____

City _____

State _____

Zip _____

Email _____

Work Phone _____

Home Phone _____

_____ Both days: \$80 (full days include lunch)

_____ Full day: \$50 _____ Friday _____ Saturday

_____ 1/2 day: \$35 _____ Friday AM PM _____ Saturday AM PM

_____ Dir _____ Supy _____ AHI _____ MT or CLS _____ MLT _____ RMA _____ RPT

Please circle the sessions you plan to attend:

Friday	1	2	3	4	5						
Saturday	6	7	8	9	10	11	12	13	14	15	16

PRE-REGISTRATION FEES: Prior to 10/23/09 | After 10/23/09 or at the door, add \$10

Make checks payable to: FSSAMT
Mail to: FSSAMT, c/o Kay Ferguson, 3712 Arava Drive, Green Cove Springs, Florida 32043

For additional information, contact:
 Edwina Szelag at (321) 434 - 5249 or e-mail: Edwina.szelag@health-first.org
 Kay Ferguson at (904) 282 - 9040 or e-mail: flakaylab@yahoo.com

Our host hotel is the ORLANDO ALTAMONTE SPRINGS HILTON, conveniently located just east of I-4 and 436 (Semoran Blvd) at 350 N. Lake Blvd, Altamonte Springs, Florida 32701. (407) 830-1985 or 1-800-HILTONS. To be assured of getting our group rate of \$85 plus tax, tell them our GROUP CODE is MED. You may also go to www.orlandoaltamontesprings.hilton.com to make your reservation. Enter MED under the Group Code.