



Register Now!

**Parathyroid Conference 2010: Emerging Guidelines in the Treatment of Parathyroid Diseases
Friday, November 12, 2010 * Bluemle Life Sciences Building**

Last Name		First Name	MI
Title (Dr., Mr., Ms.)	Personal Title (II, Jr.)	Degree	Specialty
Mailing Address			
City		State	Zip
Telephone	<input type="checkbox"/> Work <input type="checkbox"/> Home <input type="checkbox"/> Cell	Fax	Email

Web ID (Please provide the last four digits of your Social Security Number as your Web ID. This will allow you to access your CME transcript at anytime after the course.)

Registration Deadline is November 5, 2010

Registration Fees

- | | |
|---|--|
| <input type="checkbox"/> \$150 Practicing Physicians (PP) | <input type="checkbox"/> \$75 Other Healthcare Professionals (OHP) |
| <input type="checkbox"/> No Charge- Jefferson Full-Time Faculty | <input type="checkbox"/> No Charge- Jefferson Residents/Fellows |

To register please use one of the following options:

Register Online: <http://jeffline.jefferson.edu/jeffcme>

Fax: You may fax this form with credit card payment to 215-923-3212

Phone: For further information, please call the Office of CME at 1-888-JEFF-CME or 215-955-6992

Mail: Parathyroid Conference 2010
Jefferson Medical College
Office of CME
1020 Locust Street, Suite M-5
Philadelphia, PA 19107

Payment: Please make check payable to **Jefferson Medical College, Office of CME**, or provide Credit Card Information. Do not send cash. Registration will not be processed unless full payment is received. There is a \$25 cancellation fee.

Check is enclosed. Check Number: _____

I hereby authorize use of my: Visa Mastercard Amount \$ _____ Cardholder's Name: _____

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♿ If you have any special needs, please contact the CME Office by **November 5, 2010** at 1-888-JEFF-CME or 215-955-6992.