

**LARS MIDWINTER VIRTUAL CONFERENCE
FEBRUARY 20-21, 2021**

1. REGISTRANT INFORMATION – Please print or type

Name: _____ Designation _____

Name of Clinical Practice _____

City _____ State _____ Zip _____

Email _____ Phone _____

If you require special accommodation to participate in this virtual conference, please contact the LARS office at (626) 836-5800

Yes! I want to receive important information about this and other LARS activities. Check all that apply:

- Event Communications: I agree to I want to receive reminder emails, important event updates and other email communications related to this event.
- Marketing Communications: email newsletters, emails about other LARS events, and other types of electronic marketing communications.

2. SELECT A PROGRAM (required)

- 2-Day ER/ MSK Radiology 2-Day Radiology Radiation Oncology 2-Day Radiology CRS Leadership
- 1-Day Nuclear Medicine* 2-Day Nuclear Medicine + Sunday
- 1-Day Breast Imaging* 2-Day Breast Imaging + Sunday

*Nuclear Medicine or Breast Imaging tracks are offered on Saturday only. You must register for the 2-day program if you wish to attend Nuclear Medicine or Breast on Saturday and Radiology, Radiation Oncology or CRS on Sunday.

Participation in this LIVE activity includes up to a maximum of 12.5 CME/SAM credit and access to the recorded lectures after the conference.

3. REGISTRATION FEES

Group Rate Discount. Receive 10% off your registration fee when registering five (5) or more from the same company/institution. One registration form per person. Registrations must be submitted together to qualify for the discount. Applies to two-day registration only. Non-Members are not eligible.

Two-Day Conference	LARS / SCROS / CRS Member	Non-Member
Physician	<input type="checkbox"/> \$350	<input type="checkbox"/> \$650
Technologist	<input type="checkbox"/> \$250	<input type="checkbox"/> \$400
Resident or Fellow*	<input type="checkbox"/> \$50	NA

One-Day Conference*	LARS / SCROS / CRS / SNMMI Pacific SW Member	Non-Member
Physician	<input type="checkbox"/> \$175	<input type="checkbox"/> \$395
Technologist	<input type="checkbox"/> \$125	<input type="checkbox"/> \$295

**Residents and fellows must be enrolled in a 4-year accredited residency or fellowship program. Registration includes membership in LARS.

3. PAYMENT INFORMATION

Check # _____ (Payable in US currency to Los Angeles Radiological Society)

Credit Card Payment: VISA MASTERCARD AMEX DISCOVER

Credit Card #: _____ Exp. Date: _____ 3-digit code: _____

Cardholder's Name _____

Signature: _____

Credit Card Billing Address: _____ Zip: _____

Conference Registration Amount: \$ _____ + Membership Dues: \$ _____ = Total: \$ _____

- If you are renewing membership dues, please check one: Physician Member Dues: \$275 Technologist Member Dues: \$50
- New Member-** Attach a completed membership application to this registration form (or enroll online) and register at the member rate.
- Renewing Member-** 2021 dues must be paid prior to attending the Meeting. Combine your registration with dues renewal

Submit Registration via email: ewise@amgroup.us; via mail: One Capitol Mall, Ste 800, Sacramento, CA 95814
REGISTRATION DEADLINE: FEBRUARY 18, 2021