



Early Bird Registration runs January 1 – February 15; Advance Registration runs February 16 - May 31.

WE STRONGLY ENCOURAGE ONLINE REGISTRATION:

https://go.members.asma.org/events/upcoming-events

You <u>MUST</u> be an active member of **AsMA or UHMS** in order to register at the member rate. <u>Registration fee does not include</u> <u>membership dues.</u>

Fax registration form with credit card information to: (703) 739-9652

*REQUIRED - Choose only one option: 🗌 I am registering as an AsMA attendee 👘 🗌 I am registering as a UHMS attendee

Name Degree/Credentials							
Organization		Title					
Street Address	City	State/Cou	untry	Zip Code			
Email	Telephone Nu	Telephone Number Cell Phone Number Fax Number					
First-time attendee, or nev	v member? YES 🗆 NO 🗆						
If you are being funded	by the U.S. DoD please indicat	e Branch: 🗌 Army	🗌 Navy	Air Force	Coast Guard		
	ou are planning to purchase tickets ; ntering staff to prepare an appropria				ect from the list		
🗌 Vegeta	rian 🗌 Vegan 🗌 Kosher 🗌	Halal 🗌 Peanut/T	ree Nut Allergy	. 🗌 Dairy Allergy	,		
🗌 Shellfish Alle	rgy 🗌 Sesame Allergy 🗌 So	y 🗌 Wheat/Gluten-fi	ree (Celiac, whe	at allergy, OR glut	en sensitivity)		
AsMA-UHMS to take and use yo pieces include, but are not lim and UHMS websites, online ne permission to AsMA-UHMS to UHMS conference, singularly c material in connection with su	rospace Medical Association-Undersea an our photo in AsMA-UHMS marketing and ited to, printed brochures, reports, postco wsletters, and e-mail blasts. AsMA-UHMS use, encode, digitize, transmit, and displa or in conjunction with other recordings, a ich video/audio for commercial, promotic sing out of the use of your name, video, p.	promotional pieces for an ards, flyers, and materials, shall own all rights, includi y the video/audio of your s s well as to use your name, nal, advertising, and other	indefinite period- as well as online ing copyrights in o ession, presentat photograph, biog business purpos	of-time. Marketing a uses such as posting and to the photos. Y ion, or workshop giv graphic information, es. AsMA-UHMS and	nd promotional s on the AsMA 'ou also grant en at the AsMA- and ancillary		
EGISTRATION FEE		EARLY-BIRD [†]	ADVANCE 2/16 – 5/31	AT-THE-DOOR 6/1 - 6/6	REGISTRATION REMITTED		
1EMBER (UHMS membership wi	ill be verified)	1/1 – 2/15 \$475†	\$575	\$675	KEIMITTED		
NON-MEMBER		\$750†*	\$875*	\$975*			
NON-MEMBER PRESENTER		\$650†*	\$775*	\$875*			
on member mesentien			ć 400	4			
	NING/UHMS ASSOCIATE MEMBERS	\$350†	\$400	\$400			
	NING/UHMS ASSOCIATE MEMBERS	\$350† \$75†	\$400	\$400 \$125			

*Go to www.asma.org or www.uhms.org to become a member and take advantage of the reduced registration rates. *EARLY BIRD REGISTRATION MUST BE PAID IN FULL (INCLUDING ALL EVENTS AND MEAL FUNCTIONS) AT THE TIME OF REGISTRATION. *FEE COVERS ASMA OVERHEAD COSTS. CME CREDIT FOR THE FAA SEMINAR AND ASMA SESSIONS ATTENDED IS INCLUDED. FEE





NOTE: WORKSHOPS ARE LIMITED *** REGISTER EARLY

WORKSHOP	FEE	Total Fee
□ Sun., June 1, 0800-1700: Workshop: "Pre-Hospital Management of Diving Injuries" (MAX 75)	\$225	
□ Sun., June 1, 0800-1730: Workshop: "Evaluating equipment for safe use in the hyperbaric or hypobaric environment" (MAX 75)	\$225	
□ Sun., June 1, 0800-1700: Workshop: "4th Annual Aviation Mental Health - Progress, Challenges, Innovation & Evidence – Are Our Minds & Systems Getting Better?" (MAX 75)	\$200	
□ Sun., June 1, 0800-1700: Workshop: "Aerospace Mishap Epidemiology - The Science of the Denominator" (MAX 75)	\$200	
\Box Sun., June 1, 0800-1700: Workshop: "Mind Hack: Frontiers in Mental Health and Neuromodulation" (MAX 75)	\$200	
□ Mon., June 2, 1200-1300: "STOP THE BLEED® Course" (MAX 50)	\$10	
□ Tues., June 3, 1200-1300: "STOP THE BLEED® Course" (MAX 50)	\$10	
□ Wed., June 4, 1200-1300: "STOP THE BLEED® Course" (MAX 50)	\$10	
□ Thur., June 5, 1200-1300: "STOP THE BLEED® Course" (MAX 50)	\$10	
□ Fri., June 6, 0715-1730: Workshop: "Tropical and Subtropical Medicine: Operation Stone Mountain" (MAX 50)	\$250	
EVENTS # OF	FEE PER	TOTAL FEE
TICKETS	TICKET \$15	
 Sun., June 1, Welcome to Atlanta (NOTE: All Attending Event Must Have Tickets) Mon., June 2, Richard B. "Dick" Trumbo 5K Fun Run/Walk (advance purchase only) 	\$15	
Mon., June 2, Aerospace Human Factors Association Luncheon (advance purchase only)	\$50	
Mon., June 2, Civil Aviation Medical Association Luncheon (advance purchase only)	\$50	
Mon., June 2, US Air Force Flight Surgeon Luncheon (advance purchase only)	\$50	
Mon., June 2, U.S. Army Aviation Medical Association Luncheon (advance purchase only)	\$50	
Mon., June 2, U.S. Navy Luncheon (advance purchase only)	\$50	
Mon., June 2, AsMA Fellows Dinner (advance purchase only) MUST BE AN AsMA FELLOW OR GUEST OF AN AsMA FELLOW)	\$90	
Tues., June 3, AsMA Associate Fellows Breakfast (advance purchase only)	\$50	
Tues., June 3, AsMA Annual Business Meeting (advance purchase only) (Free Attendance; Ticket required for meal)	\$50	
Tues., June 3, Baromedical Nurses Association "BNA" Luncheon (advance purchase only)	\$50	
Tues., June 3, Reception to Honor International Members	\$25	
U Wed., June 4, American Society of Aerospace Medicine Specialists (ASAMS) Breakfast	\$25	
□ Wed., June 4, Aerospace Nursing & Allied Health Professionals Society Luncheon	\$50	
Wed., June 4, Aerospace Physiology Society Luncheon	\$50	
UWed., June 4, Canadian Society of Aerospace Medicine Breakfast	\$50	
U Wed., June 4, Iberoamerican Association of Aerospace Medicine Luncheon	\$50	
Wed., June 4, Society of NASA Flight Surgeons Luncheon	\$50	
Wed., June 4, UHMS Honors Night (Black Tie Optional)	\$90	
Thur., June 5, Space Medicine Association Luncheon	\$50	
Thur., June 5, UHMS Associates Luncheon (advance purchase only)	\$50	
Thur., June 5, AsMA Honors Night Banquet (Black Tie Optional)	\$90	
	TAL OF	
TOTAL AMOUNT DUE (Registration Fee Subtotal + Workshop + Subtotal of Events)		





PAYMENT MUST ACCOMPANY FORMALL PAYMENTS ARE IN U.S. FUNDSREGISTRANTS SUBMITTING VIA FAX MUST INCLUDE CREDIT CARD INFORMATIONUS Government Employees Must NOT Pay with Personal Government Travel Card

PAYMENT METHOD: CHECK #: AMEX DISCOVER MASTERCARD VISA DINER

Name as it appears on card: (PLEASE PRINT):				
Credit Card #:	Exp. Date:	Security Code:		
Street:	City:	State:		
Country:	Zip Code/Mail Code:			
Signature:	Date:			
PAYMENT MUST ACCOMPANY FORM	ALL PAYMENTS ARE IN U.S. FUNDS			
	Mail <u>with</u> payment to:			
FAX <u>with</u> credit card information to:	Aerospace Medical Association			
(703) 739-9652	320 South Henry Street			
	Alexandria, V	A 22314-3579		

Meeting Hotel Information

Hyatt Regency Atlanta 265 Peachtree Street NE Atlanta, GA 30303 Click Here to Make Online Reservations

