

LAFP'S 70TH ANNUAL ASSEMBLY & EXHIBITION

AUGUST 3 6, 2017 | THE ROOSEVELT HOTEL | NEW ORLEANS, LA

REGISTRATION FORM

AAFP ID#: _____ Member Type: _____ Specialty (if non-member) _____

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

How did you hear about this meeting? _____

[] Please check if you require special accommodations (dietary restriction) to participate in this activity. You will be contacted regarding your needs.

Check-off all events you plan to attend. If doubtful please leave blank.

These events are included in full registrations, however RSVP is required. Additional tickets may be purchased on the reverse side of this form.

Thursday, August 3, 2017

- Breakfast with Exhibitors
- Refreshment Break
- Foundation Golf Tournament (\$135 ticket)
- CME Sessions
- Lunch with Exhibitors
- Welcome Reception (7pm-9:30 pm)-RSVP Req'd

Friday, August 4, 2017

- Breakfast with Exhibitors
- Practice Management Track
- Auction/President's Party-RSVP/Ticket Req'd
- CME Sessions
- Refreshment Break
- General Assembly (LAFP members only)

Saturday, August 5, 2017

- Breakfast with Exhibitors
- Student & Resident Track
- Awards & Installation Luncheon-RSVP/Ticket Req'd
- CME Sessions
- Student & Resident Luncheon
- LAFP Membership Social
- Refreshment Break

Sunday, August 6, 2017

- Non-CME Breakfast Symposium
- CME Sessions
- Refreshment Break

REGISTRATION FEES

	THU	FRI	SAT	SUN	FULL	TOTAL
LAFP/AAFP ACTIVE MEMBER	\$125	\$125	\$125	\$125	\$475	\$ _____
LAFP/AAFP LIFE MEMBERS	\$ 75	\$ 75	\$ 75	\$ 75	\$250	\$ _____
LAFP/AAFP RESIDENT MEMBERS	\$ 75	\$ 75	FREE	\$ 75	\$175	\$ _____
LAFP STUDENT MEMBERS	FREE	FREE	FREE	FREE	FREE	\$ _____
NON-MEMBER	\$150	\$150	\$150	\$150	\$500	\$ _____

Registration Total \$ _____

Please send completed registration form to:

LAFP | 919 Tara Boulevard | Baton Rouge, LA 70806 | Fax: 225-923-2909

Room block deadline is July 2, 2017. Call (800) WALDORF and mention "LAFP" block & Group Code "FAM".

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GUEST REGISTRATION & SOCIAL TICKETS

GUEST REGISTRATION

Guest registration is \$75 for an adult or child. Includes admission into the Welcome Reception, Awards & Installation Luncheon and Foundation Auction/President's Party.

	_____ # (of guests) x \$ 75 each	= \$ _____
Badge Name: _____	Circle: Adult/Child	Child's Age (if applicable) _____
Badge Name: _____	Circle: Adult/Child	Child's Age (if applicable) _____
Badge Name: _____	Circle: Adult/Child	Child's Age (if applicable) _____
Badge Name: _____	Circle: Adult/Child	Child's Age (if applicable) _____

SOCIAL EVENTS & EXTRA TICKETS

Thursday, August 3, 2017

Foundation Golf Tournament _____ # (of players) x **\$ 135** each = \$ _____
 Name(s): _____

Friday, August 4, 2017

Foundation Auction and Presidents Party _____ # (of guests) x **\$ 45** each = \$ _____
 Name(s): _____

Saturday, August 5, 2017

Awards and Installation Luncheon _____ # (of guests) x **\$ 40** each = \$ _____
 Name(s): _____

A-la-Carte Tickets Total \$ _____

SPECIAL CONTRIBUTIONS

Sponsorship of students' attendance at Assembly _____ # (of students) x **\$ 75** each = \$ _____
 Donation(s) to LAFP Foundation for: _____ = \$ _____
 Fleming Fund F.P. Bordelon Lectureship Fund Gehringer Fund General Fund
 Jean Aitken Fund Tar Wars Tulane Fund Resident Award of Excellence

Contributions Total \$ _____

TOTAL AMOUNT DUE \$ _____

PAYMENT METHOD

Check enclosed payable to LAFP Check # _____ OR I prefer to use: Visa MasterCard Discover
 Card Number: _____ Expiration Date: _____
 Card Holder's Name: _____ 3 digit code: _____
 Billing Address: _____
 Signature: _____ Date: _____

NOTE: Refunds, less a \$100 Administrative Fee will be made upon receipt of written request until July 3, 2017.

FOR LAFP USE

Date: _____ Payment: _____ Method: _____ | Date: _____ Payment: _____ Method: _____