## **Connecticut Society of Eye Physicians Annual Education Program**

June 14, 2019

## The Aqua Turf Club 556 Mulberry Street, Plantsville, CT

## **CSEP Physician Program Registration Form**

(ophthalmologists only)

Fax to 860-567-3591 or Email debbieosborn36@yahoo.com

Please	make the following reservations:
#	CSEP members at \$120.00 pre-registered, \$150.00 member registers at event  After June 1, 2019 \$140.00 - \$175.00 member registers at event
#	MA, RI, NY, NJ ophthalmologists who are members of their state society or AAO at \$120.00 pre-registered, After June 1, 2019 \$140.00 - \$150.00 member registers at event
#	Non-CSEP ophthalmologists at \$250.00 pre-registered, \$280.00 member registers at event After June 1, 2019 \$320.00
#	Residents (all states) - Complimentary  *Note: Per direction of the Executive Committee, attendance at CSEP sponsored educational physician meetings is limited to physicians, or out of state physicians who are members of their state society, and ophthalmology residents and fellows.
`	Do NOT use this form to register for the separate meetings for ophthalmic management or almic technicians)
Name_	Street
City _	State Zip
Email	AddressTelephone
My che	eck for \$ is enclosed
Please	mail this form with your payment to: CSEP, P.O. Box 854, Litchfield, CT 06759
FAX: 8	860-567-3591 with enclosed credit card form
You ca	an scan this form and email with credit card information to debbieosborn36@yahoo.com
*****	**************************************
Check	# Received: Amount: \$

## **EARLY BIRD REGISTRATION DEADLINE JUNE 1, 2019**

The Connecticut Society of Eye Physicians designates this educational activity for a maximum of 6.75 AMA PRA Category I Credit(s)<sup>TM</sup>. Physicians should only claim credit commensurate with the extent of their participation in the activity.