



**CONFERENCE REGISTRATION**  
**18 - 20 MARCH 2010**

RENAISSANCE HOLLYWOOD HOTEL ♦ LOS ANGELES, CA

NAME (as it is to appear on your name badge)															TITLE/DEGREE									
POSITION (if applicable)										SPECIALTY (required for MDs)														
AFFILIATION/INSTITUTION																								
STREET ADDRESS																								
CITY															STATE/PROV					ZIP CODE				
COUNTRY																								
PHONE										EXTENSION					FAX									
EMAIL (required for registration confirmation)																								

**REGISTRATION FEES**

	BEFORE JULY 1	FROM JULY 1 TO OCT 1	FROM OCT 2 TO NOV 23	FROM NOV 24 TO FEB 15	FROM FEB 16 TO MAR 8	AFTER MAR 8 & ONSITE
MDs/DOs/DPMs	<input type="checkbox"/> \$500	<input type="checkbox"/> \$550	<input type="checkbox"/> \$600	<input type="checkbox"/> \$650	<input type="checkbox"/> \$700	<input type="checkbox"/> \$750
RNs/Allied Health Professionals	<input type="checkbox"/> \$400	<input type="checkbox"/> \$425	<input type="checkbox"/> \$475	<input type="checkbox"/> \$525	<input type="checkbox"/> \$575	<input type="checkbox"/> \$600
Residents/Students		<input type="checkbox"/> \$250				
Industry		<input type="checkbox"/> \$750				
MDs/DOs/DPMs—One Day		<input type="checkbox"/> \$350	Check One: <input type="checkbox"/> Thur. <input type="checkbox"/> Fri. <input type="checkbox"/> Sat.			
RNs/Allied Health Professionals—One Day		<input type="checkbox"/> \$275	Check One: <input type="checkbox"/> Thur. <input type="checkbox"/> Fri. <input type="checkbox"/> Sat.			

- REGISTRATION INCLUDES** ♦ Tuition ♦ Online Course Webcast ♦ CMEs ♦ Five Refreshment Breaks  
 ♦ Welcome to Hollywood Reception & Dinner ♦ Two Wolfgang Puck Breakfasts & Lunches

**GUEST FEES**

**Companion**  \$100 Includes Welcome to Hollywood Reception & Dinner with Open Bar, All Conference Meals - Two Breakfasts & Lunches catered by Wolfgang Puck, Five Refreshment Breaks and Access to Exhibits

**Reception**  \$50 Includes Welcome to Hollywood Reception & Dinner with Open Bar  
 Guest Name \_\_\_\_\_

**CANCELLATION POLICY** *If your registration must be cancelled, the course fee less \$150 administrative costs will be refunded if we are notified in writing by February 1, 2010. After February 1, 2010, no refunds will be given.*

**PAYMENT METHOD**

- Enclosed is a check in the amount of \$ \_\_\_\_\_ (Please make checks payable to Valley Presbyterian Hospital)
- Charge my credit card the amount of \$ \_\_\_\_\_  Visa  MasterCard  American Express  Discover
- Card# \_\_\_\_\_ Expiration Date \_\_\_\_/\_\_\_\_ Security PIN # \_\_\_\_\_ (3 or 4 digit number on back of card)
- Cardholder's Name (please print) \_\_\_\_\_ Signature \_\_\_\_\_

Online Registration at: [www.DFCon.com](http://www.DFCon.com)

MAIL TO: DF CON CONFERENCE HEADQUARTERS: 1018 HARDING STREET • SUITE 207 • LAFAYETTE, LA 70503 • USA  
 TEL: 337.235.6606 • FAX: 337.235.7300 • [registration@dfcon.com](mailto:registration@dfcon.com)  
 YOU WILL RECEIVE A CONFIRMATION OF YOUR REGISTRATION

**CONFERENCE HOTEL • RENAISSANCE HOLLYWOOD HOTEL**

1755 N. Highland Avenue • Los Angeles, CA 90028 • Reservations 800-468-3571 • 323-856-1200 • FAX: 323-491-1343  
 DF Con Room Rate: Standard Single or Double—\$220  
 Please make your room reservation NOW and refer to DF Con.