

*4th Annual Student Health Law Conference:
Taking the Health Law Career Path*
Registration Form

Complete this form to register by MAIL or FAX
MAIL: American Society of Law, Medicine & Ethics,
765 Commonwealth Ave., Suite 1634, Boston, MA 02215
FAX: (617) 437-7596 **ONLINE:** www.aslme.org

- Please register me for the *Student Health Law Conference: Taking the Health Law Career Path*
(Fee includes materials, lunch & networking reception)

Registration Rate \$40

Check Enclosed (make payable to the *American Society of Law, Medicine & Ethics*).
 Charge my Credit Card. MasterCard Visa Discover AMEX
Card # _____ Exp. Date _____

Prefix ____ First Name _____ Middle _____ Last _____

Suffix/Degrees (MD, JD, RN, etc.) _____

Email (required) _____ Telephone _____ Fax _____

Company/Organization/School Name: _____

Professional Title _____

Home Address _____

City/State/Zip _____

Business Address _____

City/State/Zip _____

My preferred mailing address is: Home Business

My total registration cost: \$ _____.

Questions? 617-262-4990 or email conferences@aslme.org

If you have special needs addressed by the Americans with Disabilities Act, notify ASLME at least 3 weeks prior to the program.

ASLME reserves the right to cancel/reschedule any program due to an insufficient number of registrants or other unforeseen circumstances. Registration cancellations must be received in writing on or before September 15, 2010 & are subject to a \$15 processing fee. Refunds for this program will not be permitted after September 30, 2010. If you would like to send a substitute, call ASLME to arrange at 617-262-4990.