

**INTERNATIONAL LYME AND ASSOCIATED DISEASES SOCIETY
ILADS
ANNUAL SCIENTIFIC MEETING
CROWNE PLAZA CENTER CITY, PHILADELPHIA
SATURDAY AND SUNDAY OCTOBER 21 AND 22, 2006
REGISTRATION FORM**

NAME: First, Last, Degree _____

AFFILIATION: (eg, Hospital, Company, etc) _____

ADDRESS: _____

ILADS MEMBER? Y/N ____ SPECIALTY: _____

TELEPHONE: _____ Confirmation e-mail or FAX _____

The program is all day Saturday and half a day Sunday. The first day's focus will emphasize new developments; the second day is a basic "How To" for medical professionals. CME Category I credit pending.

FEES:

ILADS MEMBERS:

Voting Members: \$275.

RNs: \$175

All Others: \$175.

NON-MEMBERS:

MDs: \$325

RNs: \$225

All Others: \$225

Joseph Burrascano will present his lecture Sunday morning at 7:30 am.

It is entitled *Practical Tips for Setting up a Lyme Practice*.

The fee of \$100 includes copious handouts. _____

Total enclosed: _____

Payment type: Personal Check _____ or

Credit card: VISA _____ AMEX _____ MC _____

Card Number: _____ exp. _____

Billing address, including zip code:

This form may be faxed to 301 263 0776 or mailed to Barbara Buchman, Executive Director, ILADS PO Box 341461 Bethesda, MD 20827-1461. Pre-registration will be accepted per space available until two weeks before the meeting. Questions? lymedocs@aol.com, or 301 263 1080