



**AOT Injection Lab
August 2008 Registration**

Course Title: Advanced Ocular Therapeutic Injection Lab [seven (7) hours CE]

Date: August 17, 2008 [Sunday] - Injection Lab (8:30 am – 4:30 pm)

Location: Pacific University College of Optometry / 2nd Floor, Jefferson Hall

[8/17/08] Injection Lab (*space is strictly limited to 48*) **Registration is on a first come first serve basis**

<input type="checkbox"/> OOPA/AOA Member -----	\$ 590
<input type="checkbox"/> Non OOPA/AOA Member -----	\$ 790
Total Registration Fees -----	\$ _____

Name: _____

AOA ID #: _____ (*dues must be current to receive member rate*)

Clinic: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax #: _____

E-Mail address: _____

Special Dietary Request: _____

Payment Preference Information:

- Check (*made payable to Oregon Optometric Physicians Association*)
- Visa Mastercard

Account # _____

Three digit code on back of card # _____ (*for security purposes*)

Exp. # _____ Amount: \$ _____

Signature: _____

Lab Attire:

Please wear a short sleeve shirt. If you are a contact lens wearer, please bring your contact lens case and your glasses.

Cancellation policy: *Due to the fact we are guaranteeing space that could be utilized by another attendee, cancellation less than twenty (20) days prior to event could result in forfeiture of registration fee.*

Mail registration to: OOPA, 4404 SE King Rd., Milwaukie, Oregon 97222

www.oregonoptometry.org