

Personal Information

*Required Field

First Name*	Middle Initial	Last Name*	Suffix (ex. Jr., Sr.)
Credentials (i.e. PA-C, FNP, etc.)*	Specialty*	NPI*	

Email*	Nickname on Badge
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By registering for this event, you are opting in to our mailing list.
Please use the email address in which you wish to receive conference materials. You may unsubscribe at any time.

Registration Information

Conference rates valid May 24, 2023 - May 24, 2024

Live Conference Options

Full Conference (Tuesday-Friday)

	Super Saver	Early Bird	Advance	Standard
	On/Before December 21	On/Before January 21	On/Before April 21	After April 21
	\$987	\$1,087	\$1,137	\$1,157

Additional Information

Street Address*

Address Line 2

City*	State / Province / Region*	ZIP / Postal Code*	Country*
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Home Phone Number*	Work Phone Number	Cell Phone Number
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Include your cell number to receive periodic conference updates including conference material updates, certificate information, and more.

Providing your cell phone number gives permission for Skin, Bones, Hearts & Private Parts to send periodic text messages. (4/mo.)
Msg and data rates may apply. Reply STOP to unsubscribe.

SPiRiT Program Information

Are you NEW to our programs and have you been referred by a SPiRiT member? Enter their information here. All SPiRiT information must be completed for eligibility. [See SPiRiT program details.](#)

SPiRiT Member First Name

SPiRiT Member Last Name

SPiRiT Member Code

How did you learn about the conference? Please only select one (the primary source)*

- SBHPP Website HealthJobsNationwide Colleague/Friend MD Linx Social Media
 NursePractitionerConferences.com Previous Attendee News-Line Emails Other

If Other, please specify*

Payment Information



Credit Card Number*

Cardholder Name*

Expiration Date (MM/YYYY)*

Security Code*

Billing ZIP Code*

Total: _____

Hotel Information

New ways to SAVE in 2024! Receive a \$100 rebate on conference registrations by booking your guest room at our host hotel! [See rebate details.](#)

Registration badges will be required for admission to all events. Payment is due with the registration form and must be submitted according to the indicated dates (shown on page 1 of registration) to qualify for the corresponding rate. Materials can only be guaranteed to pre-registered attendees – be sure to register early.

Please complete this printable registration form and mail to Skin, Bones, Hearts & Private Parts. One registration form per person.

Refunds:

Written notice of cancellation must be received by April 21, 2024. A \$75 administrative fee will be retained. For a detailed look at the refund policy, please visit our [FAQs](#).

Mail or Fax Instructions:

If paying by credit card, please be sure to include all credit card information, including credit card number and billing zip code. Payment is due with registration form and must be postmarked/submitted by the above dates to qualify for corresponding rate. To avoid duplicate charges, do not mail original registration form if you have already faxed it or submitted it via webform.

Complete form and mail to: Skin, Bones, Hearts & Private Parts
1905 Woodstock Road, Suite 2150
Roswell, GA 30075

Complete form and fax to: 770-640-1095

Make checks payable to DMGCME: DMG's Federal Tax ID#: 58-2582200

Media Release:

SBHPP will take photos of attendees throughout the conference and ask for reviews or testimonials from attendees on video and in writing. These items are for SBHPP use only and may appear on the SkinBonesCME.com website, news updates, conference brochures, social media outlets, or other future SBHPP promotional material. By virtue of your attendance, you agree to usage of your likeness in such media.

Sponsors:

By registering for this event, you are giving permission for Skin, Bones, Hearts & Private Parts to share your name, credentials, and email with our sponsors.

Americans With Disabilities Act:

In accordance with the Americans with Disabilities Act, please notify the Skin, Bones, Hearts & Private Parts office if you have any special needs.