

# AAOS CME COURSE REGISTRATION FORM

Please print and mail with check or credit card details to: **AAOS, 9400 West Higgins Road, Rosemont, Illinois 60018**  
(Allow 3 weeks to process mailed registrations.) *OR* Please print and fax with credit card details to: **(847) 823-8125**

## 22nd Annual AAOS Workers' Compensation and Musculoskeletal Injuries: Improving Outcomes with Back-to-Work, Legal and Administrative Strategies

**Course #3056 • November 6 – 7, 2020**  
**Virtual Course**

## AAOS Whiplash Injury and Other Reported Injuries: The Science of Accident Reconstruction and Impact/Vehicular Biomechanics

**Half-day course**

**Course #3646 • November 5, 2020**  
**Virtual Course**

### Workers' Compensation Course:

- |  |                                      |
|--|--------------------------------------|
| AAOS Member/Candidate Member/Associate Member/<br>International Member | <input type="radio"/> <b>\$1,174</b> |
| AAOS Emeritus Member   | <input type="radio"/> <b>\$974</b>   |
| Resident/Post-Residency in Fellowship/<br>PA Member/U.S. Military*     | <input type="radio"/> <b>\$974</b>   |
| PA Nonmember/Nurse/Allied Health                                       | <input type="radio"/> <b>\$1,074</b> |
| Nonmember/Other Physician  | <input type="radio"/> <b>\$1,474</b> |

*\*For AAOS members in active U.S. military duty only*

### Bundle & Save! Add IME Half-day


- |                                      |                                      |
|--------------------------------------|--------------------------------------|
| <input type="radio"/> <b>\$1,673</b> | <input type="radio"/> <b>\$1,523</b> |
| <input type="radio"/> <b>\$1,473</b> | <input type="radio"/> <b>\$1,323</b> |
| <input type="radio"/> <b>\$1,473</b> | <input type="radio"/> <b>\$1,323</b> |
| <input type="radio"/> <b>\$1,673</b> | <input type="radio"/> <b>\$1,523</b> |
| <input type="radio"/> <b>\$2,173</b> | <input type="radio"/> <b>\$2,023</b> |

### IME Half-day Only

- |                                    |
|------------------------------------|
| <input type="radio"/> <b>\$499</b> |
| <input type="radio"/> <b>\$499</b> |
| <input type="radio"/> <b>\$499</b> |
| <input type="radio"/> <b>\$599</b> |
| <input type="radio"/> <b>\$699</b> |

**Tuition enclosed \$** \_\_\_\_\_ (U.S. Dollars only, payable to American Academy of Orthopaedic Surgeons)

Print clearly please

NAME _____		ACADEMY ID# _____	
ADDRESS _____			
CITY _____	STATE _____	ZIP _____	COUNTRY _____
WORK TELEPHONE _____		MOBILE TELEPHONE _____	
EMAIL ADDRESS _____		FAX NUMBER _____	
<input type="radio"/> Visa <input type="radio"/> Mastercard <input type="radio"/> American Express			
CREDIT CARD NUMBER _____		EXPIRATION DATE _____	
<input type="radio"/> Check here if ADA (Americans with Disabilities Act) accommodation is desired. An AAOS staff person will contact you. 			

**Refunds**  
Requests for a refund must be received in writing at the Academy offices (AAOS, 9400 West Higgins Road, Rosemont, Illinois 60018) or email customerservice@aaos.org. Course cancellations are subject to the following refund policy: 30+ days prior – Registration fee less \$150 cancellation fee; 29 to 15 days prior – 50% refund; 14 days or less – No refund.

**Course Cancellation**  
The Academy reserves the right to cancel a course thirty (30) days prior to the course date. Any person who has registered for the course will be notified by email at the address noted in the AAOS member database. A telephone call will also be made to each registrant for whom a number is available. Persons whose registration is received after a course is cancelled will be notified by telephone and email. Registration fees will be refunded in full. However, other costs incurred by the registrant, such as airline or hotel penalties, are the responsibility of the registrant.