

EMS REGION III "PARTNERS 4 LIFE" CONFERENCE

2010 M*A*S*H BASH – Registration Form

COMPLETE THIS FORM AND . . .

Mail with payment or copy of purchase order to:
 EMS Region III • PO Box 1895 • Clovis NM 88102-1895
 Website: www.emsregion3.org
 Fax with credit card number or copy of purchase order to: (575)769-3485
 Questions: conference@emsregion3.org or phone (575)769-2639

Please type name/affiliation as you wish them to appear on your name badge:

FIRST NAME: _____
 LAST NAME: _____
 AFFILIATION: _____
 MAILING ADDRESS: _____
 SHIPPING ADDRESS: _____
 CITY STATE ZIP: _____
 DAYTIME PHONE: _____

Special Note: Confirmation will be sent via email:

EMAIL: _____

Please check off the Pre-conference Workshops you will be attending:

- Workshops starting Saturday, April 24**
- P01 – Basic Extrication\$220
- Workshops starting Sunday, April 25**
- P02 – ECG Recognition \$95
 - P03 – Wildland Fire Fighting\$220
 - P04 – Wilderness Emergency Medical Course.....\$420
 - P05 – Advanced Medical Life Support (AMLS)..... \$160
 - P06 – Technical Rope Rescue\$225
- Workshops starting Monday, April 26**
- P07 – Grant Writing..... \$90
 - P08 – Basic/1st Responder Refresher..... \$120
 - P09 – EMT-I Refresher\$120
 - P10 – Trauma Nurse Core Course\$250
 - P11 – Advanced Cardiac Life Support (ACLS) Provider \$150
 - P12 – EMT-P Refresher\$270
 - P13 – Advanced Cardiac Life Support (ACLS) Instructor \$150
 - P14 – Introduction to Moulage\$245
- Workshops starting Tuesday, April 27**
- P15 – Hot Topics in NM EMS Management\$100
 - P16 – Heavy Extrication \$250
 - P17 – Neonatal Resuscitation Provider.....\$140
 - P18 – Pediatric Advanced Life Support (PALS) Instructor\$150
- Workshops starting Wednesday, April 28**
- P19 – Basic Life Support Renewal \$50
 - P20 – Emergency Nurse Pediatric Course..... \$250
 - P21 – Pediatric Advanced Life Support (PALS) Provider.....\$150
 - P22 – Prehospital Trauma Life Support (PHTLS)\$160
 - P23 – Topics in Out-of-Hospital Critical Care..... \$85
 - P24 – Basic Life Support (CPR) Instructor.....\$125
 - P25 – Advanced Moulage \$145
- Workshops starting Thursday, April 29**
- P26 – Pediatric Education for Prehospital Professional (PEPP).....\$140
 - P27 – Comprehensive Airway Management Program (CAMP) \$0
 - P28 – Trauma Registrar Workshop – E-Coding..... \$0
 - P29 – Acupressure Workshop..... \$0
 - P30 – End Tidal CO2 Monitoring..... \$0
 - P31 – E.S.C.A.P.E.....\$100
 - P32 – ACS: Therapeutic Advances For EMS..... \$0
 - P33 – Step Out of Pain – The Rossiter Way\$20

Which Core Conference Sessions are you attending? (Please X your classes)

Friday, April 30, 2010 Opening Keynote Address..... C01
 Friday, April 30, 2010 Morning Breakout Sessions..... C02 C03 C04 C05
 Friday, April 30, 2010 Early Afternoon General Session..... C06
 Friday, April 30, 2010 Afternoon Breakout Sessions C07 C08 C09 C10
 Friday, April 30, 2010 Late Afternoon General Session..... C11
 Saturday, May 1, 2010 Morning General Session C12
 Saturday, May 1, 2010 Morning Breakout Sessions..... C13 C14 C15 C16
 Saturday, May 1, 2010 Early Afternoon General Session..... C17
 Saturday, May 1, 2010 Early Afternoon Breakout Sessions C18 C19 C20 C21
 Saturday, May 1, 2010 Late Afternoon Breakout Sessions..... C22 C23 C24 C25
 Saturday, May 1, 2010 Bonus Late Afternoon Session C26
 Sunday, May 2, 2010 Morning General Session C27
 Sunday, May 2, 2010 Morning Breakout Sessions..... C28 C29 C30 C31
 Sunday, May 2, 2010 Closing Keynote Address C32

Registration Fees (please check one)

	Before April 2	April 3 to May 2
<input type="checkbox"/> Core Conference Registration Fee	\$200	\$250
<input type="checkbox"/> Squad Rate Fee (7 or more)	\$175	\$250
<input type="checkbox"/> NM EMT Association Member Fee	\$175	\$250
<input type="checkbox"/> Daily Rate Fee	\$150	
<input type="checkbox"/> Thurs. Night Social Tickets # _____	\$ 10	\$ 10
<input type="checkbox"/> Friday Night Cookout Tickets # _____	\$ 20	\$ 20

(If you register for the core conference your meal tickets/events are included)

A Conference Fees \$ _____
B Pre-conference Proc. Fee* \$ _____
C Pre-conference Class Fee/s \$ _____
D Extra Thurs. Social Ticket/s \$ _____
E Extra Fri. Cookout Ticket/s \$ _____
F TSFA Scholarship Deduction \$ _____
TOTAL AMOUNT ENCLOSED \$ _____

*There is a one-time processing fee of \$50 per student for Pre-Conference. Your charge will be \$50 plus the cost or combined cost of the workshops attended.

T-SHIRT SIZE: (Please circle one) **S** **M** **L** **XL** **XX** **XXX**

Payment Information:

___ Enclosed is my check for \$ _____ payable to EMS Region III
 ___ Enclosed is my purchase order # _____ for \$ _____
 ___ Charge my: VISA MasterCard

Card # _____
 Expiration Date _____
 Billing Address _____
 Card Holder Name _____
 Daytime Telephone _____
 Authorized Signature _____

PLEASE DO NOT WRITE IN THE FOLLOWING BOX – THANK YOU!

Check #	MO#	Credit Card	PO #	Conf.#
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