



PGC REGISTRATION FORM

First Name

Last Name

Clinic/Practice

Email

Degree

Address

Phone

City

State

Zip

REGISTRATION FEE

Registration Type	Fee
OAO Member Early Bird Rate (before 2/15/19)	\$435
OAO Member (after 2/15/19)	\$485
Non-Member Early Bird Rate (before 2/15/19)	\$605
Non-Member (after 2/15/19)	\$655
100% Retired/OAO Life Members	\$85
Residents/Fellows – no cost	\$0
Total Due \$	

PAYMENT INFORMATION

Register Online at www.oregoneyephysicians.org, or fax or mail this form with payment information.

Name on Card

Card Number

Expiration Date

CVV

Email for Receipt

Signature

Oregon Academy of Ophthalmology

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www.oregoneyephysicians.org | staff@oregoneyephysicians.org

CANCELLATION POLICY: \$50 administrative service charge for cancellations