OREGON ACADEMY OF OPHTHALMOLOGY

2020 Ophthalmic Medical Technology Meeting

NEW DATE: Friday, August 28, 2020
World Forestry Center | Portland, OR

REGISTRATION FORM

Clinic ____________________ Phone ____________________

Address ____________________

City ____________________ State __________ Zip __________

TECHS

#1 Name ____________________ ☐ COA ☐ COT ☐ COMT ☐ RN ☐ Other __________
Email ____________________

#2 Name ____________________ ☐ COA ☐ COT ☐ COMT ☐ RN ☐ Other __________
Email ____________________

#3 Name ____________________ ☐ COA ☐ COT ☐ COMT ☐ RN ☐ Other __________
Email ____________________

#4 Name ____________________ ☐ COA ☐ COT ☐ COMT ☐ RN ☐ Other __________
Email ____________________

#5 Name ____________________ ☐ COA ☐ COT ☐ COMT ☐ RN ☐ Other __________
Email ____________________

REGISTRATION

Qty	Registration Type	Total
	Early Bird Rate - $250 (before 8/14/20)	
	Registration - $300 (after 8/14/20)	
		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 ____________________

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