



JACK NEARY 2 ADVANCED PAIN MANAGEMENT WORKSHOP

November 4-5, 2018

Fax: 847-692-3224

METHOD OF PAYMENT

_____ MasterCard _____ Visa _____ NOVUS (Discover Card) _____ American Express

Card Number

Exp. Date

Cvv Number

Name on Card

Billing Address

(The credit card provided will be used to pay for the registration fee).

Do not make travel arrangements until you have received confirmation of registration

Cancellation Policy

If you are not able to attend this event, you must notify the AANA Department of Convention & Meeting Planning in writing. The cancellation fee schedule is listed below:

- 16 days or more prior to event a cancellation fee of \$250.00 will be deducted from your refund.
- 0-15 days prior to event – NO REFUND because the expense of your anticipated participation has already been incurred

All cancellation notices should be emailed to meetings@aana.com. Alternatively, you may fax your notice to 847-692-3224.

Recording waiver (Photography, Audio & Video)

Portions of this AANA meeting may be photographed or audio/video recorded for various purposes, including reporting, promotion, archival, or sale and distribution. By registering, individuals agree that the AANA may photograph or record by audio/video their attendance and involvement in any portion of the meeting. Furthermore, individuals agree that the AANA may use these photographs and/or recordings without additional approval or permission.