

**Midwest Podiatry Conference Clinical Examination Registration Form**

**April 18<sup>th</sup> and 19<sup>th</sup>, 2018**

**Hyatt Regency Chicago**

**Exam Registration Form - for Clinical Exam Only**

**\*\*\*\*MUST BE A MEMBER OF ASPMA FOR 90 DAYS TO REGISTER FOR THE EXAM\*\*\*\***

**The review course will be offered on Wednesday April 18, 2018**

**Exam next day Thursday April 19, 2018**

**Both will be held at:**

**Hyatt Regency Chicago**

**151 East Wacker Drive, Chicago, IL 60601**

**You must also be registered to attend the assistants program**

PLEASE PRINT

Name \_\_\_\_\_

ASPMA Membership number \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_ E-mail \_\_\_\_\_

Cell Phone \_\_\_\_\_

Exam Fee - \$325.00 until March 18<sup>th</sup>, 2018 includes The Comprehensive Study Guide to Podiatric Medical Assisting, 5th Edition Please allow 10 business days for shipping of the study guide.

Exam fee \$375.00 after March 19<sup>th</sup>, 2018 includes The Comprehensive Study Guide to Podiatric Medical Assisting, 5th Edition **due to the date of your registration you might not receive the study guide before the exam date.**

**Deadline to register for the exam is April 11, 2018**

**Mail completed form and check to:**

**ASPMA**

**1616 North 78<sup>th</sup> Court**

**Elmwood Park, IL 60707-3548**

**Phone: (708) 715-0071 FAX: (708) 456-4947 E-mail: karenpmac@aol.com**

**A \$25 fee will be charged for any returned check**

**If you wish to pay by credit card you may fax this form**

Card # \_\_\_\_\_

Exp Date \_\_\_\_/\_\_\_\_

CVV # (3 digit number on back of card) \_\_\_\_\_

Name on Card \_\_\_\_\_

Mailing address: \_\_\_\_\_

Billing Zip code \_\_\_\_\_

Signature Required \_\_\_\_\_