



# REGISTRATION FORM

## Identification and Treatment of Late-Life Depression

### An AAGP Maintenance of Certification Conference

November 12-13, 2010 – Le Merigot, a JW Marriott Hotel – Santa Monica, California

**Please type or print:**

Last Name	First	MI	Degree
Address			
City	State	Zip	
Daytime Phone	Fax		
Email:			

### **Registration Fees** (please check appropriate box) –

**Pre-Registration Deadline November 5, 2010**

	<u>Pre- Registration Fees</u>	<u>On-Site Registration Fees</u>
<b>AAGP Members</b>	<input type="checkbox"/> \$210.00	<input type="checkbox"/> \$260.00
<b>Non-Members</b>	<input type="checkbox"/> \$290.00	<input type="checkbox"/> \$340.00
<b>Fellows/Residents</b>	<input type="checkbox"/> \$125.00	<input type="checkbox"/> \$175.00

### **Please make check payable to: AAGP**

All payments must be made in U.S. dollars and drawn on a U.S. bank.

**Mail to AAGP, P.O. Box 17127, Baltimore, MD 21297-1127 or**

**Fax to 301-654-4137**

### **Please charge by Credit Card**

[ ] MasterCard [ ] Visa [ ] American Express for \$ \_\_\_\_\_

Name on Card (please print): \_\_\_\_\_

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

Expiration Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

**Note: Cancellations received in writing by November 5 will be refunded minus a \$35 administrative fee.**