

# MAINE SOCIETY OF ANESTHESIOLOGISTS

## Annual Winter Meeting at Sugarloaf

### February 11-12, 2012

### Registration Form

Name: \_\_\_\_\_  Member  Non-Member

Email: \_\_\_\_\_

Name of Guest: \_\_\_\_\_

#### MEETING REGISTRATION FEES:

MSA Member      \$50.00                       Non-Member      \$75.00

(Guests are not required to pay a registration fee.)

Please complete the following so that we may keep an accurate count for meals.

\_\_\_ I will be attending the Reception & Dinner                      \_\_\_\_\_ I will be bringing a guest (\$40)

\_\_\_ I will not be attending the Reception and Dinner                      \_\_\_\_\_ # Attending the breakfast buffet  
(family welcome - no fee)

Dinner Choices    #1 Vegetarian    or    #2 Mixed Grill Plate

My dinner selection is # \_\_\_\_\_ (included in registration fee for member).

My guest's dinner selection is # \_\_\_\_\_ (\$40).

Total for meals .....\$ \_\_\_\_\_  
 Registration Fee .....\$ \_\_\_\_\_  
 Total...\$ \_\_\_\_\_

Please make check payable to:  
 Maine Society of Anesthesiologists

Return this completed form by  
February 8, 2012 with payment to:

Anna M. Bragdon, MeSA  
 PO Box 190, Manchester, ME 04351