

## Registration Form (Please Print)

Mail or FAX this registration form along with the enrollment fee of \$680.00 to:

**DermPath Slide Review** • 1730 Elton Road, Suite 11 • Silver Spring, MD 20903  
Telephone: 301-439-4301 • Toll Free: 800-365-6205 • FAX: 301-439-4340

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE \_\_\_\_\_

FAX \_\_\_\_\_

EMAIL \_\_\_\_\_

## Payment Method

Check or money order made payable to: DermPath Slide Review

Credit Card    MasterCard    VISA   Amount to be charged \$ \_\_\_\_\_

CARD NUMBER \_\_\_\_\_ EXP. DATE \_\_\_\_\_

CARDHOLDER'S NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education (ACCME) through the Joint Sponsorship of MedChi, The Maryland State Medical Society, and DermPath Slide Review. MedChi is accredited by the ACCME to provide continuing medical education for physicians.

MedChi designates this educational activity for a maximum of 15 *AMA PRA Category 1 Credits™*. Physicians should only claim credit commensurate with the extent of their participation in the activity.