



# American Gynecological & Obstetrical Society



## AGOS 2017 ANNUAL MEETING The Drake Hotel Chicago September 15-16, 2017 REGISTRATION FORM

### ATTENDEE INFORMATION: (PLEASE PRINT OR TYPE)

<b>First Name:</b>		<b>Last Name:</b>	
<b>Badge Name:</b>		<b>Designation:</b> <input type="checkbox"/> MD <input type="checkbox"/> PhD <input type="checkbox"/> Other:	
<b>Institution:</b>			
<b>Address:</b>			
<b>City:</b>		<b>State:</b>	<b>Zip:</b>
<b>Email:</b>		<b>Phone:</b>	
<b>Invited Guests Only: I am an invited guest of the following AGOS member:</b>			

#### ON/Before Monday, Aug. 14 Registration Fee:

- Member **\$400**
- Invited Guest of Member **\$400**
- Spouse/Companion\* **\$100**

#### After Monday, Aug. 14 Registration Fee:

- Member **\$450**
- Invited Guest of Member **\$450**
- Spouse/Companion\* **\$100**

**Spouse/Companion's Name:** \_\_\_\_\_

**Spouse/Companion's Email:** \_\_\_\_\_

*\*The Spouse/Companion category is intended for spouses and companions of meeting attendees. This registration category allows the spouse/companion to partake in all AGOS Annual Meeting meal functions and social gatherings. This fee must be paid even if all functions are not attended.*

**SPECIAL EVENTS:** All listed social events are included in the AGOS registration fee. Number attending must match the number registered above.

**Spouse & Companion Event: Friday, Sept. 15, 9:30 – 11:00 a.m.** \_\_\_\_\_ number attending  
*This event will be a breakfast, along with a tour of the historical Drake Hotel. Details will be sent upon registering for this event.*

**President's Welcome Reception: Friday, Sept. 15, 5:30 p.m. – 7:00 p.m.** \_\_\_\_\_ number attending

#### SPECIAL MEAL OR ASSISTANCE REQUIREMENTS:

- Please check here and specify (below) special assistance or vegetarian meal requirements.

Special Requests: \_\_\_\_\_

**Total Registration** \$ \_\_\_\_\_

**Please indicate form of payment:** VISA MasterCard American Express Check\*

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

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

\*Make checks payable to the American Gynecological and Obstetrical Society and send with a copy of this registration form to:  
**AGOS Annual Meeting, 230 W. Monroe St., Suite #710, Chicago, IL 60606**

#### RETURN THE COMPLETED FORM:

Fax: (312) 235-4059 Attn: Sohana Cantwell · E-Mail: [sohana.cantwell@agosonline.org](mailto:sohana.cantwell@agosonline.org)

Mail: AGOS Attn: Sohana Cantwell, 230 W. Monroe St #710, Chicago, IL 60606

**CANCELLATION POLICY:** All cancellation requests must be submitted in writing to [agos@agosonline.org](mailto:agos@agosonline.org). Cancellations that are received on or before August 14, 2017 will receive a full refund, less a \$50.00 USD administrative fee. After August 14, 2017, refunds will be issued at the discretion of the AGOS Council.