

Aloha Update: Pediatrics® 2023

September 30-October 6, 2023 • Grand Hyatt Kauai Resort & Spa • Hawaii

CONFERENCE REGISTRATION (Online: <https://pediatriccme.regfox.com/aloha-update-pediatrics-2023>)

Name: _____ MD Other _____

Specialty: Pediatrics AAP# _____ Family Medicine AAFP# _____
 Other _____

Address: _____

City/State/Zip: _____

Primary Phone: _____ Office Home Cell Other

Other Phone: _____ Office Home Cell Other

Email (please include, receipt will be sent via email): _____

Tuition:

Early Registration by July 1, 2023

General Registration after July 1, 2023

- | | | |
|--|----------------------------------|----------------------------------|
| <input type="radio"/> Physician | <input type="checkbox"/> \$1,005 | <input type="checkbox"/> \$1,055 |
| <input type="radio"/> Past Physician Registrant | <input type="checkbox"/> \$955 | <input type="checkbox"/> \$1,005 |
| <input type="radio"/> CHLA Staff/Alumni | <input type="checkbox"/> \$945 | <input type="checkbox"/> \$995 |
| <input type="radio"/> AAP CA Dist. IX, Chap. 2 | <input type="checkbox"/> \$945 | <input type="checkbox"/> \$995 |
| <input type="radio"/> *Resident | <input type="checkbox"/> \$745 | <input type="checkbox"/> \$795 |
| <input type="radio"/> Retired Physician | <input type="checkbox"/> \$745 | <input type="checkbox"/> \$795 |
| <input type="radio"/> Non-Physician (NP, PA, RN, etc.) | <input type="checkbox"/> \$745 | <input type="checkbox"/> \$795 |

* A letter from the Chief of Staff must accompany registration for reduced Resident/Intern tuition. Full tuition will be charged if not pre-registered.

Previous Attendees: Register online by **May 15, 2023** to receive a \$25 discount off the above Early Registration fees.

Guest Pass: If you would like your guest(s) to join you for the conference continental breakfast, Oct. 1-5, 2023, 7:00-7:30 am. The conference continental breakfast includes standard continental breakfast items (juice, pastries and coffee/tea) plus fresh fruit (daily) and a varying selection of yogurt, boiled eggs and oatmeal. It remains open until approximately 8:00 am.

_____ @ \$180 per adult/teen (13 & over) = \$ _____ h

_____ @ \$90 per child, 12 & under = \$ _____

Group Luau: Please send information when available

Total: Tuition: \$ _____ + Guest Pass(es): \$ _____ = Total: \$ _____

Check enclosed (payable to “Children’s Hospital Los Angeles Medical Group” or “CHLAMG”)

Credit Card: Visa MasterCard Am Ex Discover

Card No: _____ Security code: _____ Exp Date: _____

Name on Card: _____ Signature: _____

Billing address: _____

Cancellations: Up to August 29, 2023: Full refund of all fees paid. After August 29, 2023: \$200 cancellation fee, no refunds for luau/guest pass(es). No post-conference refunds. Send cancellation request to pediatricCME@gmail.com.

Return your completed registration form to:

Children’s Hospital Los Angeles Medical Group

ATTN: Aloha Update 2023 • 3250 Wilshire Blvd., Suite 1101 • Los Angeles, CA 90010

800-3-KID-CME (800-354-3263) or 323-361-2752 • Fax: 323-925-7490 • **CME Email:** pediatricCME@gmail.com

www.PediatricCME.org or www.chla.org/cme-conferences