

How to Register

Online

Using your credit card, you can register for courses with our secure server at www.ubccpd.ca. You will receive a confirmation email within a couple of days of registering.

Phone

Call us at **604 875-5101** to register using your VISA or MasterCard. Regular office hours are Monday to Friday, 8:00am to 4:30pm.

Fax

Fax us at **604 875-5078** to register using VISA or MasterCard. Please feel free to duplicate the adjacent form, and type or use dark ink to complete it.

Email

Email us at cpd.info@ubc.ca with all your contact details and the name of course that you would like to register for and we will call you back.

Mail

Mail your registration form using the adjacent form with your cheque, money order (payable to UBC) or credit card details.

**UBC CPD, 855 West 10th Avenue
Vancouver, BC V5Z 1L7**

Refunds and Cancellations

PLEASE READ AND CAREFULLY UNDERSTAND OUR CANCELLATION POLICY BEFORE SUBMITTING YOUR REGISTRATION:

1. Cancellation by individual registrant:

Should you be required to cancel your registration you must do so immediately in writing by email to cpd.info@ubc.ca or via fax at 604-875-5078 before the refund cut off date of **October 1 2010**. After you have successfully contacted our office with notice of your cancellation then return by mail your Income Tax Receipt. At this point your registration will be refunded less a **\$50** handling charge. Between October 1, 2010 and the conference date, **no refunds** will be granted for withdrawal, unless a replacement can be secured by the registrant— the \$50 cancellation fee to the original registrant will still apply should a replacement be found. For more details on the CPD cancellation and refund policy visit www.ubccpd.ca then click "About Us" and "Refund and Cancellation Policies and Procedures".

2. Cancellation by the organizers:

The Division of Continuing Professional Development reserves the right to cancel a course between 10-20 business days prior to the course date. Each registrant will be notified by telephone, followed by written notification and full refund. The University of British Columbia is not responsible for any costs, including but not limited to airline or hotel penalties.

Location & Accommodation

Renaissance Vancouver Hotel Harbourside

1133 West Hastings Street, Vancouver, BC

All participants must make their own arrangements for lodging. A limited number of rooms are reserved at the Marriott Renaissance Harbourside, featuring special rates for conference participants. Guest Rooms are available for \$189 plus applicable taxes, based on single or double occupancy. Please contact in-house Reservations directly at 604-689-9211; Toll Free: 1-800-905-8582; Website: www.marriott.com. Please mention the group name "**Screening Mammography Forum**" to ensure that you receive the appropriate rate. In order to receive the rate all reservations must be made by **September 21, 2010**.

www.ubccpd.ca

REGISTRATION FORM

2010 Screening Mammography Forum

ME8518

October 22-23, 2010 Renaissance Harbourside, Vancouver BC

*****PLEASE ENSURE YOU HAVE READ THE CANCELLATION POLICY BEFORE COMPLETING FORM*****

CONTACT DETAILS

Dr. Mr. Ms.

Urban Rural

Last Name

Given Name(s)

Address

City

Prov/State

Postal Code

Telephone

Fax

Email

****Friday Oct 22nd – Educational Evening for Technologists Only****

- I am an SMPBC Technologist and I will attend Friday October 22nd – Complimentary
- I am an Other Technologists and I will attend Friday October 22nd – **Fee of \$25**

Saturday October 23rd - CONFERENCE FEES

Includes all course materials, continental breakfast, breaks, and lunch

Please select one:

Physicians/Surgeons BC:	<input type="checkbox"/>	\$195
Radiologist in BC:	<input type="checkbox"/>	\$195
UBC Residents*:	<input type="checkbox"/>	Complimentary
SMPBC Radiologist Screener:	<input type="checkbox"/>	Complimentary
SMPBC Technologist:	<input type="checkbox"/>	Complimentary
BCIT Student (Technologist)*:	<input type="checkbox"/>	Complimentary
BC Cancer Agency Staff:	<input type="checkbox"/>	Complimentary
Other Technologists:	<input type="checkbox"/>	\$125
Other: _____	<input type="checkbox"/>	\$195

* Residents/students need to provide proof of their status and submit with registration

****Sunday Oct 24th - SMPBC Chief Screeners Only****

- I will attend the Screeners' Advisory Committee Meeting on Sunday October 24th
- I will not attend the Screeners' Advisory Committee Meeting on Sunday October 24th

PAYMENT INFORMATION

\$ _____



TOTAL AMOUNT ENCLOSED

Credit Card Number

Expiry Date

Name of Cardholder

Personal Information is collected on this registration form pursuant to section 26 of the Freedom of Information and Protection of Privacy Act, RSBC 1996 c. 165. This information will be used for the purposes of facilitating the conference and collecting aggregate statistics. UBC CPD publishes a participant list for the conference that includes the participant's name and city. Please check the box below if you DO NOT wish to have your information included on the participant list:

- I DO NOT CONSENT to being on the participant list.
- All participants who register for UBC CPD courses are included on the mailing list for future educational programs. If you DO NOT wish to have UBC CPD course brochures mailed to you, please indicate:
 - I DO NOT wish to be on the UBC CPD mailing list.

For further information, please contact UBC CPD at: cme.cpd.info@ubc.ca or 604-875-5101

I am a: Member Certificant Fellow of the College of Family Physicians of Canada

I do not have an affiliation with the College of Family Physicians of Canada

Do you hold a clinical or academic appointment with the UBC Faculty of Medicine? Yes No

Are you a fellow of the Royal College of Physicians and Surgeons of Canada (RCPSC)?

Yes No If yes, please list your specialty: _____