

55th Annual IMSS Conference
“Region VIII IMSS Family Reunion: The Family You Can Choose!”
2018 Intermountain States Seminar – September 27 - 29, 2018
 Snow King Sports and Events Center, Jackson, Wyoming

Institutional Registration: (Deadline for pre-registration is September 22, 2018. Late or on-site registration is an additional \$25.00.)
 (PHOTOCOPY, COMPLETE THIS FORM, AND MAIL WITH CHECK TO ADDRESS BELOW)

Institution: _____
 Street Address, City, State, Zip Code: _____
 Contact Person: _____ Phone: _____ Email: _____

The Institutional Pass is good for 4 one-day passes and includes general sessions, breakouts, Midday Roundtables, meals, and social events scheduled for that day (except for the Friday night Social). An institutional pass is \$550.00. Up to 4 people may share one pass in any combination.

The Friday night social is an additional \$30.00 per person.

Non-shaded areas below require specific information. Please print each participant’s name and write the Session numbers in the boxes corresponding to the sessions being attended by each. Also indicate participation in Friday Social.

	Thursday, September 27				Friday, September 28				Saturday, September 29	
	8:15 – 9:45 General Session A	10:00 – 11:00 General Session B	11:00 – 1:00 Lunch with Exhibitors	Thursday Breakouts	8:00 – 9:00 General Session C	9:00 – 11:00 Brunch with Exhibitors	11:00 – 12:00 General Session D	12:00 N-1:30 pm Midday Roundtables Urinalysis Case Studies, POC Competency, Practical Approaches to Diagnostic Parasitology (circle one of 3)	Friday Breakouts	Social 6:00 pm – 9:00 pm (Separate Payment Required)
Choose 1 Each Session.				Choose 1 Each Session.					Choose 1 Each Session.	
(1:00 – 2:00 pm)				(1:30 – 3:00 pm)					(8:30 – 10:00 am)	
1 2				9 10 11					15 16	
(2:15 – 3:15 pm)				(3:15 – 4:45 pm)					(10:15 – 11:45 am)	
3 4 5	12 13 14	17 18								
(3:30 – 4:30 pm)										
6 7 8										
1										
2										
3										
4										

Please list # of persons and type of dietary restrictions here for **Thursday Lunch, Friday Brunch and Social:**

Number of institutional passes _____ x \$550.00 = \$ _____

Friday night social _____ x \$ 30.00 = \$ _____

Total = \$ _____

Make check payable to **IMSS**. Mail payment and completed registration form to:
 Mary Galindo
 959 E. 800 S.
 Bountiful, UT 84010

megalindo@aol.com

**All details available at the Meeting website: <http://asclsregion8.org/IMSS/> **