



# 2022 Virtual FOMA Mid-Year Seminar

## September 16-18, 2022

Up to 27 AOA 1-A CME's will be offered

- 8.5 AOA 1-A hours available 9/16
- 8.5 AOA 1-A hours available 9/17
- 5 AOA 1-A hours available 9/18
- 5 AOA 1-A hours available On-Demand

*1 hour Laws & Rules and Professional Medical Ethics; 2 hours of Prevention of Medical Errors;  
2 hours of Prescribing Controlled Substances; 2 hours Domestic Violence*

### Registration Form

Name (please print) \_\_\_\_\_ AOA # \_\_\_\_\_

FOMA Member yes / no Florida License # \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Specialty/Certification \_\_\_\_\_

### Please Choose Appropriate Category Below

# of individual registrations	Member Rate BEFORE 8/16/22	Member Rate AFTER 8/16/22	Non-Member
___ Practicing DO.....	\$500	\$525	\$750
___ FOMA Life or Retired DO or Military.....	\$300	\$325	\$425
___ Resident/Fellow.....	\$100	\$125	\$150
___ Intern/Student.....	No fee	No fee	No fee
___ Sunday Only - 5 Florida Mandatory Hours.....	\$300	\$325	\$550

TOTAL registrations: \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Method of payment (circle) Check/ Visa/ MasterCard/ American Express/ Discover

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ V-Code \_\_\_\_\_

Credit Card Billing Address:  same as mailing address above or Billing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_ Phone \_\_\_\_\_

Please make your check payable to FOMA  
Mail your registration to FOMA at:  
 2544 Blairstone Pines Drive, Tallahassee, FL 32301  
 Or fax this form to FOMA at (850) 942-7538.

If you have any questions, call (800) 226-3662.