

**American College of Physicians  
ACP Michigan Associates' Scientific Meeting  
May 9, 2008  
Best Western Sterling Inn, Sterling Heights, MI**

**Registration Form**

ACP # \_\_\_\_\_  
Name \_\_\_\_\_ MD DO \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Daytime Phone \_\_\_\_\_ Home Phone \_\_\_\_\_  
Fax \_\_\_\_\_ E-mail address \_\_\_\_\_

Is this a new address?

**Registration Fees**

Check one category that best applies. Registration fee includes continental breakfast, lunch and all scientific sessions and materials

ACP Categories

ACP Member \$30.00  
 ACP Associate \$30.00  
 ACP Medical Student No Fee

Non-ACP Categories

Nonmember Physician \$50.00  
 Nonmember Resident \$50.00  
 Nonmember Medical Student No Fee  
 Other, Non-physician (Guests/Spouses) \$50.00

**On-Site registration will be available for members at \$50.00 and Non-members at \$60.00**

Please make your check payable to **ACP Michigan Chapter** and mail to:

ACP Michigan Chapter  
Attn : Marty Muth  
A631B East Fee Hall  
Michigan State University  
East Lansing, MI 48824

Charge to :  Visa  Master Card  Discover  American Express

Card Number : \_\_\_\_\_ Expiration Date (mm/yy) \_\_\_\_\_

Name on Card : \_\_\_\_\_

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

If paying by credit card, form can be sent via facsimile: Fax Number 517 353 9604

Check if you are disabled and require assistance. Attach a written description of needs and submit to the Michigan Chapter at least 30 days prior to the start of the meeting.