



Canadian Critical Care Review 2010

## PARTICIPANT REGISTRATION FORM

**YOU CAN NOW REGISTER ON LINE AT: <http://www.criticalcarereview.ca>**

**Please Print:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Office Tel: \_\_\_\_\_ Office Fax: \_\_\_\_\_

Home Tel: \_\_\_\_\_ Email: \_\_\_\_\_

University / Program: \_\_\_\_\_ Program Director: \_\_\_\_\_

Please indicate any dietary restrictions, requirements or allergies: \_\_\_\_\_

**Registration Options:** Registration includes admission to all sessions, Program Syllabus, On-line Meeting Archive recording for all sessions, all breakfasts and lunches indicated in the program.

	Early Bird Pricing Before April 17, 2010	Regular Price After April 17, 2010
<input type="checkbox"/> Residents/Fellows Registered in a Canadian Program	\$150.00	\$250.00
<input type="checkbox"/> International Medical Graduates who are not trainees in a Canadian Program	\$750.00	\$850.00
<input type="checkbox"/> Physicians	\$750.00	\$850.00

**Please make your cheque payable to: Canadian Critical Care Society  
And send to: Canadian Critical Care Review, P.O. Box 133, St. Clements, Ontario,  
NOB 2M0**

**Note:** All cancellations must be received in writing no later than May 21, 2010 for a full refund, less an administrative fee of \$50.00. No refunds will be issued after this date.

*For further information please contact:*

LOUISE BRUNS

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