

2009 Registration Information

Registration Deadline: Two weeks prior to the workshop

Mini Fellowship for Advanced Laparoscopic Surgery • Fee \$250

- February 15-17
- July 19-21
- September 13-15
- Check if you need lodging

Mini Fellowship for Laparoscopic and Hand-assisted Colorectal Surgery • Fee \$250

- March 8-9
- June 11-12
- October 1-2
- December 3-4
- Check if you need lodging

Mini Fellowship for Open and Laparoscopic Ventral, Incisional and Inguinal Hernia Repair • Fee \$250

- May 7-8
- September 3-4
- Check if you need lodging

Laparoscopic Urological Surgery Workshop: Laparoscopic Nephrectomy & Robotic Prostatectomy* • Fee \$250

- September 10-11
- Check if you need lodging

Mini Fellowship for Lymphatic Mapping and Sentinel Node Biopsy* • Fee \$650

- January 29-30
- June 4-5
- October 29-30
- Check if you need lodging

Obesity Conference 2009* • March 6-7

- Fee \$195 (Physicians)
- Fee \$150 (Allied Health Professionals, Residents & Fellows)
- Check if you need lodging

Vena Cava Filter Workshop • Fee \$325 • November 13

- Check if you need lodging

Percutaneous Tracheostomy • Fee \$400 • March 27

- Check if you need lodging

Mini Fellowship for Flexible Endoscopy* • Fee \$750 November 11

- Check if you need lodging

Carolinas Medical Center's 3rd Annual Liver Course* December 5

- Fee \$150 (Physicians)
- Fee \$100 (Allied Health Professionals, Residents & Fellows)
- Check if you need lodging

Mini Fellowship for Hepatic Microwave Ablation • Jan. 15 – 16 (Please check www.CMC-CLASP.org for additional course dates.)

- Check if you need lodging

Introduction to Basic Science Research • Fee \$695 July 12-15

- Check if you need lodging

Total Laparoscopic Hysterectomy Course* • April 3 - 4 (Please check www.CMC-CLASP.org for additional course dates.)

- Fee \$250 (without lab - Fri. only)
- Fee \$375 (with lab - Fri. & Sat.)
- Check if you need lodging

Mini Fellowship for Laparoscopic & Hand-Assisted Solid Organ • Fee \$250

- May 17-18
- November 1-2
- Check if you need lodging

***Course offerings with asterisks are Category 1**

Last Name	First Name	MI	E-mail Address
() _____	() _____	() _____	_____
Work Telephone	Home Telephone	Fax Number	
Hospital Affiliation		Practice Name	
Mailing Address (<input type="checkbox"/> Home or <input type="checkbox"/> Work Please check one)		City	State ZIP Code
Special Needs: _____			

Make check payable to: CMC-CLASP (Carolinas Laparoscopic & Advanced Surgery Program)

Mail registration with check to:

Carolinas Medical Center, Attn: Judy Quesenberry, MEB 103, PO Box 32861, Charlotte, NC 28232-2861
 Telephone: 704-355-4823 Fax: 704-355-8147 E-mail: jquesenberry@carolinas.org

Cancellations received in writing at least two weeks prior to the course will be refunded, less a \$100 administrative fee. No refund will be made on cancellations received less than two weeks prior to the course.