

16th Annual Continuing Education Seminar

FEB 20-21, 2021

Practice/Company Name

Tech Registration continued...

First Name	Last Name	Email	Phone

Mail your payment to the following address:
 Surgical Eye Care Foundation
 Attention: Bryan Watson
 C/O Eye Specialty Group
 825 Ridge Lake Blvd.
 Memphis, TN 38120

Pricing
 ___ x \$195 Sat & Sun = ___
 ___ x \$145 Sat Only = ___
 ___ x \$75 Sun Only = ___
 ___ x \$60 CPR = ___
 ___ x \$60 Tech CE = ___
 Total = ___