

THE NATIONAL EMERGENCY MEDICINE BOARD REVIEW COURSE

REGISTRATION FORM www.EMBoards.com

To obtain more information or to register
by phone, simply call **1-800-458-4779**
(9:00am-4:30pm ET, M-F)

Mail Completed Form To:
The Center for Medical Education, Inc.
P.O. Box 600
Creamery, PA 19430 USA

or Fax Your Form To:
1-888-329-8626

Course Pricing

	Tuition
Physician	\$1,195
Resident*/PA*/NP*/RN*	\$895
US Acute Care Solutions Provider**	\$695

Add-on Item (optional add-on item)

BIZ BUZZ Rapid EM Board Review Flashcards (Additional \$75)

Please Note: BIZ BUZZ flashcards are only \$75 if purchased in advance or \$89 on-site. BIZ BUZZ flashcards purchased in advance will be shipped in approximately 4-7 business days from the date of registration.



*For residents, a letter verifying residency status by the departmental chair or program director must accompany your registration to receive the discounted tuition. We require nurses, NPs and PAs to provide a copy of their license to receive the discounted tuition.

**US Acute Care Solutions providers must use their US Acute Care Solutions or EMP email address when registering to receive the discounted tuition.

Registrant Information

First Name _____ Last Name _____

Home Address _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

Email _____

Home Phone _____ Work Phone _____

Title (Check one): Physician - MD Physician - DO Physician Assistant - PA Nurse Practitioner - NP Registered Nurse - RN
 Resident - MD Resident - DO

US Acute Care Solutions Provider? Yes No

Course Dates & Locations (please select)

- February 12 - 15, 2019**
Las Vegas, Nevada (Planet Hollywood Resort & Casino)
- August 11 - 14, 2019**
Baltimore, Maryland (Renaissance Baltimore Harborplace Hotel)
- August 24 - 27, 2019**
Las Vegas, Nevada (Bally's Las Vegas)

Course Syllabus (optional add-on item)

Participants will receive a USB flash drive containing the course manual on-site for free. You can alternatively purchase a printed version of the manual that you will receive on-site.

Printed Paper Manual (Additional \$75)

The printed version of the course manual (to be received on-site) is available for an additional \$75 in advance or \$95 on-site.

Billing Information

Credit Card Number _____ - _____ - _____ - _____

Expiration Date _____ CVV# (Last 3 numbers on back of Visa and MasterCard)


First Name of Authorized Cardholder _____


Last Name of Authorized Cardholder _____

Billing Address _____

Billing City _____ Billing State/Province _____ Billing Zip/Postal Code _____

Billing Country _____ Billing Email _____

 Visa Check # _____

 MasterCard Made payable to "Center for Medical Education" in U.S. funds