



Foot & Ankle Arthroscopy Skills Lab

March 2, 2018
Pylant Medical Facility, Grapevine, TX

Registration Fees: *(Please select one)*

| ASPS Member (includes Student & Resident members) | Non-Member |
|--|------------|
| \$899.00 | \$1149.00 |

Attendee Information:

Name _____

Address _____

City & State _____

Zip Code _____

License & State _____

Phone _____

Email Address _____

Method of Payment:

Check MasterCard VISA American Express

Credit Card Number _____

Expiration Date & Security Code _____

Please make checks payable to the American Society of Podiatric Surgeons.

Registration forms can be faxed to:
(301) 571-9549

Or emailed to:
skchergosky@aspsmembers.org

Or you can mail your registration
form to:

ASPS
9312 Old Georgetown Road
Bethesda, MD 20814