

The UTAH SOCIETY of RADIOLOGIC TECHNOLOGISTS
WINTER CONFERENCE • Intermountain Medical Center • Feb. 24th 2018
5121 South Cottonwood St., Murray, Utah 84107

REGISTRATION FORM

NAME _____

ADDRESS _____ CITY _____ STATE _____

ZIP _____ TELEPHONE HOME (____) _____ WORK (____) _____

CELL (____) _____ AART# _____

E-MAIL (Required) _____

REGISTRATION INCLUDES:
EDUCATIONAL COURSES, A MORNING CONTINENTAL BREAKFAST
Children are NOT allowed in the classroom during the course.

PLEASE INDICATE YOUR MODALITIES BY APPROPRIATE BOX

- RADIOLOGY RADIATION THERAPY ULTRASOUND
 NUCLEAR MEDICINE MAMMOGRAPHY LPT (Licensed practical tech.)

	Pre Registration	On-Site Registration
MEMBER	<input type="checkbox"/> Free	<input type="checkbox"/> Free
NON-MEMBER	<input type="checkbox"/> \$50.00	<input type="checkbox"/> \$65.00
STUDENT	<input type="checkbox"/> Free	<input type="checkbox"/> Free

TOTAL AMOUNT PAID \$ _____

IF PAYING BY CREDIT CARD FILL IN THE FOLLOWING:

- VISA MASTER CARD AMERICAN EXPRESS

CARD # _____ EXP. DATE _____

MAKE CHECKS PAYABLE TO: U.S.R.T., NO PURCHASE ORDERS ACCEPTED.

REGISTRATION MUST BE MAILED TO THE ADDRESS BELOW AND
POSTMARKED BY FEB. 18, 2018

USRT
P. O. BOX 572468
MURRAY, UTAH 84157 - 2468

CANCELLATION POLICY: Request for a refund must be made in writing, mailed or e-mailed to usrt@usrt.net and postmarked by Feb. 18, 2018
ALL REFUNDS are subject to a \$25.00 cancellation fee.