

For full details, visit us online at [CVIPhiladelphia.org](http://CVIPhiladelphia.org)


## CVI's 30th Annual Clinical Management of Heart Disease 2023

Sunday, October 8, 2023

# Registration Form



Sign up and pay your registration by September 15th and **SAVE \$50** off your registration fee!

	Early Bird Discount (by 9/15/23)	Regular Price (after 9/15/23)	Total
Physicians/Industry	@ \$125	@ \$175	\$ _____
<b>ABIM MOC Knowledge Points:</b> Awarding of MOC points requires additional attestation, post program evaluation and test questions	N/A	@ \$50	\$ _____
Fellows, Residents & Trainees	@ \$75	@ \$125	\$ _____
Training Program Name: <i>(Must be included to receive this rate)</i>			
Advanced Practice Providers, Nurses	@ \$75	@ \$125	\$ _____
<b>Apple iPad Drawing Entry</b>	<b>FREE</b>	N/A	<b>FREE</b>
 <b>Tax Deductible Donation to CVI25! Campaign</b>		@ \$25 \$ _____ Other amount	\$ _____
Pay by Visa/MC/Amex: Add \$6 per registration* _____ x \$6 = \$ _____			
			<b>GRAND TOTAL: \$ _____</b>

\*Prices above reflect discount of \$6 for payment by cash or check. Please add \$6 for a Visa/MC/AMEX payment

## Select Your Breakout

Please rank your Breakout selection (1st, 2nd, 3rd). We will accommodate as much as possible.

Cardiometabolic Disease    
  Non-Coronary ASCVD    
  Management of Complex HF

**You MUST register in advance to attend the sessions. Register online at [cviphiladelphia.org](http://cviphiladelphia.org)**

*Sorry no virtual or on-demand options for this program.*

Name \_\_\_\_\_

Degree \_\_\_\_\_ Gender  M  F

**Email address** \_\_\_\_\_

Clinical Affiliation Name \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Is this address work? \_\_\_\_\_ Home? \_\_\_\_\_ Other? \_\_\_\_\_

Please make checks payable to:

**CVI**  
 P.O. Box 56598  
 Philadelphia, PA 19111  
 Phone: 215-389-2300  
 Fax: 215-389-5450

Visa    MC    Amex  
 Card # \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_  
 Name as appears on card \_\_\_\_\_  
 Billing address of card \_\_\_\_\_  
 \_\_\_\_\_  
 Signature \_\_\_\_\_

### Course Registration Cancellation Policy:

Requests in writing for refunds, less \$35 administrative fee, by 9/27/23 processed after the meeting.

## Win a FREE CVI Apple iPad!

Register and pay 9/15/23. Complete your online evaluation by 11/10/23 - **It's that easy!** Winner will be notified by email.

**Questions?**  
**215-389-2300**