

CED's 2ND ANNUAL

Medtech 2009

CONFERENCE
Advancing Medical Technologies

Medtech 2009 – Advancing Medical Technologies
May 14, 2009
 The Fuqua School of Business – Duke University, Durham, NC
www.cednc.org/medtech

Registration Form

	Before 5/11	On-Site*
CED Members	\$350	\$425
Non-Members	\$425	\$500
University Faculty, Staff, Government, Non-Profit Employees	\$300	\$375
Additional Company Reps	\$225	\$250
Students	\$100	\$100

* On a space available basis. Please contact CED Registration to determine if there is space available at 919.549.7500 x116 or email registration@cednc.org.

TO REGISTER FOR MEDTECH 2009

- All registrations **must** be accompanied by payment.
- All finalized registrations **may not be substituted**.
- Pre-registration **closes** at 5:00pm on Monday, May 11, 2009.
- Due to facility capacity, space is limited, early registration is encouraged.
- **Secure Online:** Complete the online registration form below. This is a secure site.
- **Fax:** Credit card orders may be faxed to 919.549.7405
- **Mail:** Checks made payable to CED or credit card orders may be mailed. Mail with payment to CED, 100 Capitola Drive, Suite 101, Durham, NC 27713

QUESTIONS

Questions about your registration? Contact CED at 919.549.7500 x116 or email registration@cednc.org.

*Required Field

*Registrant Type

- CED Member
 Non-Member
 Additional Company Representative
 Government, University or Non-Profit employee
 Student

Prefix* (circle one) Mr. / Ms. / Dr. Name* _____

Title _____

Company _____

Mailing Address* _____

City* _____ State* _____ Zip* _____

Daytime Phone* _____ Fax _____

Email* _____

Company URL _____

***Required Field**

***Primary Business Activity**

- Medical Device/Technology Company
- Contract Research Organization
- Vendor/Supplier
- Service Partner
- Investor
- University or Academic Group
- Clinician
- Government/Non-Profit
- Media

***How did you hear about Medtech 2009?**

- Print Mail
- Email
- Online Advertisement
- Newspaper/Magazine Advertisement
- CED Program
- TV/Radio Advertisement
- Referral
- Website

<p>*Required Field</p> <p>Total Due to CED*: _____</p> <p>Charge to my* ___ Visa ___ MasterCard ___ American Express</p> <p>Account Number* _____</p> <p>Exp. Date* _____</p> <p>Authorized Name on Card* _____</p>
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FOR MORE INFORMATION

Call CED at 919.549.7500 x116

CANCELLATION/REGISTRATION POLICY

- Pre-registration closes 5:00pm on Monday, May 11, 2009.
- Cancellations received before April 14, 2009 are refundable less a \$50 administrative fee.
- Cancellations received between April 15, 2009 and May 11, 2009 are refundable less 50% of the price at the time of registration.
- Cancellations received after May 11, 2009 are non-refundable.
- No-shows will be charged full conference fees.
- Registrations are non-transferable.
- Confirmations will be sent prior to the event date.