

# 2025 MOA ANNUAL MEETING REGISTRATION

## February 8, 2025

Hilton Baltimore BWI Hotel

1739 W Nursery Rd • Linthicum Heights, MD 21090

MAIL: MOA, 110 West Road, Suite 227, Towson, MD 21204

PHONE: 877-337-1200 or 410-847-9300

FAX: 410-494-0515

ONLINE: [www.mdortho.org](http://www.mdortho.org)

NAME \_\_\_\_\_ DEGREE \_\_\_\_\_

PRACTICE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

EMAIL \_\_\_\_\_

### REGISTRATION FEES

(Registration Fee includes Scientific Sessions, Continental Breakfast, Lunch, and Breaks)

STATUS (circle one)	FEE
MOA Member	Free
Active Duty Military	Free
Resident/Fellow/Student	Free
Allied Health Professional	\$25
Non-Member	\$100

### CANCELLATION POLICY

Full refund (less \$35 administrative fee) will be granted if a cancellation is made prior to 10 business days before the meeting date; a 50% refund if canceled between 5 and 10 business days before the meeting date. No refund will be granted within 5 business days of the meeting date.

- ◇ I would like to opt out of receiving promotional emails.
- ◇ Do not share my information with third party vendors.

### PAYMENT METHOD

Enclosed is a check for \$ \_\_\_\_\_ (payable to Maryland Orthopaedic Association)

Please charge my credit card:    Visa        MasterCard        American Express

Credit Card # \_\_\_\_\_ Exp Date \_\_\_\_\_ CVV \_\_\_\_\_

Name on Card \_\_\_\_\_

Billing Address \_\_\_\_\_