

Twin Cities Chapter: Advertising and Promoting On- and Off-Label Information Under the FDCA

Thursday, 5 November 2020 • 12:00 – 1:00 pm CST

Webcast



2022449

Mr Ms Dr First Name _____ MI _____ Last Name _____

Advanced Degree: JD PhD PharmD MD DDS DMD SCD DVM RAC

Title _____

Company _____

Address _____ Suite/Apt _____

City/ State/Province _____

Mail Stop _____ Postal Code _____ Country _____

Phone (with area/country code) _____

Business Email Address (required for confirmation) _____

Please list special dietary/accessibility requirements _____

Please provide the name and number of an individual to contact in case of an emergency:

Name _____ Phone Number _____

REGISTRATION FEES (All fees in US dollars)

RAPS Member	<input type="checkbox"/> FREE
Nonmember	<input type="checkbox"/> \$20

METHOD OF PAYMENT

- International Wire Transfer:** Fax a completed form and copy of bank wire confirmation to the following (a \$30 administration fee will apply): RAPS account #1000043228997; ABA #061000104 Swift Code SNTRUS3A; SunTrust Bank, Richmond, VA. Must reference name of registrant. All bank charges are the responsibility of the payer.

Check # _____

Credit Card American Express MasterCard Visa

Account # _____ Billing Postal Code _____

Exp. Date _____ Card Security Code (CVV): _____ Name as it appears on card _____

Signature _____

Questions? Call RAPS Solutions Center at +1 301 770 2920, ext. 200. Please see **RAPS.org** for complete registration policies and procedures.

HOW TO REGISTER

EMAIL: Send completed form to support@raps.org

MAIL: RAPS c/o Account Payable

5635 Fishers Lane, Suite 400

Rockville, MD 20852

FAX: +1 301 841 7956 (credit card or wire)

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