



25th International Meeting On Advanced Spine Techniques **JULY 11-14, 2018** LOS ANGELES, CALIFORNIA, USA
 Advance Registration Deadline: June 15, 2018 (Registrations will ONLY be accepted onsite after this date – no exceptions)

25th IMAST
 July 11-14, 2018
 LOS ANGELES, CA, USA

DELEGATE INFORMATION

ONLINE REGISTRATION AVAILABLE AT WWW.SRS.ORG/IMAST2018/REGISTRATION

SRS ID Number	First (Given) Name	Last (Family) Name	Suffix (Jr., III, etc)	Degree (MD, PhD, etc)
Email Address (All correspondence is done by email)			Institution	
Mailing Address				
City	State	Zip/Postal Code	Country (To appear on badge)	
Specialty: <input type="checkbox"/> Orthopaedic Surgeon <input type="checkbox"/> Neurosurgeon <input type="checkbox"/> Other: _____				
Assistant/Company Personnel Email Address: _____				
Dietary Restrictions/Requirements: _____				

Base Registration Fees*	Advance Registration On or Before June 15, 2018	One-Day Registration July 11 <input type="checkbox"/> or 14 <input type="checkbox"/>	One-Day Registration July 12 <input type="checkbox"/> or 13 <input type="checkbox"/>	Onsite Registration July 11-14
SRS Fellow – Physician	<input type="checkbox"/> \$900 USD	<input type="checkbox"/> \$250 USD	<input type="checkbox"/> \$500 USD	\$1,000 USD
SRS Fellow – Non-Physician	<input type="checkbox"/> \$450 USD	<input type="checkbox"/> \$250 USD	<input type="checkbox"/> \$500 USD	\$550 USD
SRS Emeritus Fellow	<input type="checkbox"/> \$450 USD	<input type="checkbox"/> \$250 USD	<input type="checkbox"/> \$500 USD	\$550 USD
Resident/Fellow/Medical Student	<input type="checkbox"/> \$450 USD	<input type="checkbox"/> \$250 USD	<input type="checkbox"/> \$500 USD	\$550 USD
Non-Member Physician	<input type="checkbox"/> \$1,100 USD	<input type="checkbox"/> \$250 USD	<input type="checkbox"/> \$500 USD	\$1,200 USD
Non-Member Non-Physician	<input type="checkbox"/> \$550 USD	<input type="checkbox"/> \$250 USD	<input type="checkbox"/> \$500 USD	\$650 USD
Industry Representative	<input type="checkbox"/> \$1,150 USD	<input type="checkbox"/> \$250 USD	<input type="checkbox"/> \$500 USD	\$1,250 USD
Delegates from Reduced Rate Countries**	<input type="checkbox"/> \$400 USD	<input type="checkbox"/> \$250 USD	<input type="checkbox"/> \$500 USD	\$500 USD

* The delegate base registration fee includes entrance to the general and concurrent sessions, special symposia, instructional course lectures, roundtable discussions, complications series, debates, lunch with the experts, the IMAST exhibit hall, breakfasts, breaks, lunches and the Welcome Reception on Wednesday, July 11. To register a guest please see guest form at www.srs.org/imast2018/registration.

**For information on countries that qualify for reduced rate registration, please visit the SRS website at www.srs.org/imast2018/registration.

Session Selection – (selection may be changed onsite)***	Date	
2A: Whitecloud Award Nominees and Top Scoring Abstracts	Thursday, July 12	<input type="checkbox"/>
2B: Abstract Session 3: Adult Deformity		<input type="checkbox"/>
2C: Abstract Session 4: Early Onset Scoliosis		<input type="checkbox"/>
3A: Debates: Controversies in Spine Surgery: Adult	Thursday, July 12	<input type="checkbox"/>
3B: Debates: New and Innovative Advances in Spine Care		<input type="checkbox"/>
4A: Case Presentations: Degenerative Conditions of the Lumbar Spine	Thursday, July 12	<input type="checkbox"/>
4B: Case Presentations: Pediatric Deformity		<input type="checkbox"/>
4C: Case Presentations: Cervical and Trauma		<input type="checkbox"/>
5A: Common Complications: Adult Degenerative and Deformity Surgery	Thursday, July 12	<input type="checkbox"/>
5B: My Worst Complications in Pediatric, Growing Spine and Neuromuscular Surgery		<input type="checkbox"/>
6A: Abstract Session 5: AIS	Friday, July 13	<input type="checkbox"/>
6B: Abstract Session 6: Kyphosis/Congenital/Neuromuscular Deformity		<input type="checkbox"/>
6C: Abstract Session 7: Trauma & Tumor		<input type="checkbox"/>
7A: Abstract Session 8: Lumbar Degenerative/Spondylolisthesis	Friday, July 13	<input type="checkbox"/>
7B: Abstract Session 9: Cervical Spine & Innovative Degenerative Topics		<input type="checkbox"/>
7C: Abstract Session 10: Complications/Infections		<input type="checkbox"/>
8A: ICL: Spinal Deformity: Denovo/Degenerative Adult Lumbar Scoliosis	Friday, July 13	<input type="checkbox"/>
8B: Debates: Cervical Considerations for Deformity & Degenerative Spine		<input type="checkbox"/>
8C: Case Presentations: The Growing Spine – Current State of the Art		<input type="checkbox"/>
9A: ICL: Value and Quality	Friday, July 13	<input type="checkbox"/>
9B: ICL: Coronal Plane Balance in Adult Deformity Surgery		<input type="checkbox"/>
10A: ICL: Common Challenges in Adult Spinal Deformity	Friday, July 13	<input type="checkbox"/>
10B: Case Presentations: Common Challenges in Pediatric Spine Surgery		<input type="checkbox"/>
10C: Case Presentations: The Latest in Spine Tumor Treatment		<input type="checkbox"/>
11A: ICL: AIS – Most Current Practices: How the Experts Decide	Saturday, July 14	<input type="checkbox"/>
11B: ICL: Adult Spinal Deformity – Expert Decision Making and Practices		<input type="checkbox"/>

***These educational programs are included in the base registration fee, but delegates are asked to indicate which sessions they plan to attend.

Social Event Add-Ons	Date	Additional Fee
Welcome Reception	Wednesday, July 11	\$0 USD <input type="checkbox"/>

Total Fees \$ _____ USD

Cancellation Policy:

All cancellations must be received in writing. Delegates may fax their cancellation to (414) 276-3349 or email it to meetings@srs.org. Delegates will receive a confirmation and refund within 14 days of receipt of their cancellation notice. SRS will grant a full refund, less a 10% processing fee, for cancellations received in writing on or before June 29, 2018. No refunds will be granted after June 29, 2018. SRS Tax ID #23-7181863

Waiver:

Submission of this registration form and payment of associated fee serves as agreement by the delegate to release the Scoliosis Research Society, the JW Marriott Los Angeles at L.A. LIVE and their respective agents, servants, employees, representatives, successors, and assigns, from any and against all claims, demands, causes of action, damages, costs, and expenses, including attorneys' fees, for injury to person or damage to property arising out of attendance at IMAST 2018. In addition, the delegate hereby grants permission to use his/her likeness in a photograph or other digital reproduction in any and all of its publications, including website entries, without payment or any other consideration, agreeing that these materials will become the property of SRS which has the right to edit, alter, copy, exhibit, publish or distribute this photo for purposes of publicizing its programs or for any other lawful purpose. Additionally, the delegate waives any right to royalties or other compensation arising or related to the use of the photograph.

- I do not wish to be included on the delegate list provided to exhibitors.
- I do not wish to be included on any published delegate list including programs, mobile apps, etc.

PAYMENT INFORMATION

Checks (US funds drawn on a US bank only) may be made payable and mailed to:

Scoliosis Research Society • 555 E. Wells Street, Suite 1100 • Milwaukee, WI 53202

Or provide credit card information with complete billing address:

Check Enclosed Visa MasterCard American Express

Card Number	Security Code	
Expiration Date		
Name (As it appears on the card)		
Billing Address		
City	State	Zip/Postal Code
Country		
Signature (I agree to pay according to the card issuer agreement)		