

# REGISTRATION FORM

2017 11<sup>TH</sup> BIENNIAL  
**ISAKOS CONGRESS**  
 JUNE 4-8, 2017 | SHANGHAI, CHINA

**THANK YOU FOR YOUR INTEREST IN REGISTERING FOR THE 2017 ISAKOS CONGRESS IN SHANGHAI, CHINA!**

**PLEASE PROVIDE ALL REQUESTED INFORMATION**

Forms received without all information will not be processed

**ISAKOS ID#:**

**PERSONAL INFORMATION (PLEASE PRINT CLEARLY FOR BADGE PURPOSES)**

FIRST (GIVEN) NAME	LAST (SURNAME) NAME	DEGREE	
ADDRESS			
CITY	STATE / PROVINCE	POSTAL CODE	COUNTRY
TELEPHONE	FAX	E-MAIL	

**REGISTRATION FEES** (All prices are in US dollars.)

**ISAKOS Congress Registration**

	Early By February 28, 2017	Standard By April 30, 2017	Onsite After April 30, 2017
<input type="checkbox"/> Member*	US \$770	US \$870	US \$970
<input type="checkbox"/> Non-Member	US \$1,020	US \$1,120	US \$1,220
<input type="checkbox"/> Presenter / Faculty	US \$845	US \$945	US \$1,045
<input type="checkbox"/> Allied Health**	US \$470	US \$570	US \$670
<input type="checkbox"/> Resident / Fellow**	US \$470	US \$570	US \$670
<input type="checkbox"/> Exhibitor Representative***	US \$620	US \$695	US \$770
<input type="checkbox"/> Instructional Course Lectures	No Additional Fee – Included in Registration		

**ICLs**

Monday, June 5	<input type="checkbox"/> ICL #1	<input type="checkbox"/> ICL #2	<input type="checkbox"/> ICL #3	<input type="checkbox"/> ICL #4	<input type="checkbox"/> ICL #5	<input type="checkbox"/> ICL #6	<input type="checkbox"/> ICL #7	<input type="checkbox"/> ICL #8
Tuesday, June 6	<input type="checkbox"/> ICL #9	<input type="checkbox"/> ICL #10	<input type="checkbox"/> ICL #11	<input type="checkbox"/> ICL #12	<input type="checkbox"/> ICL #13	<input type="checkbox"/> ICL #14	<input type="checkbox"/> ICL #15	<input type="checkbox"/> ICL #16
Wednesday, June 7	<input type="checkbox"/> ICL #17	<input type="checkbox"/> ICL #18	<input type="checkbox"/> ICL #19	<input type="checkbox"/> ICL #20	<input type="checkbox"/> ICL #21	<input type="checkbox"/> ICL #22	<input type="checkbox"/> ICL #23	<input type="checkbox"/> ICL #24
Thursday, June 8	<input type="checkbox"/> ICL #25	<input type="checkbox"/> ICL #26	<input type="checkbox"/> ICL #27	<input type="checkbox"/> ICL #28	<input type="checkbox"/> ICL #29	<input type="checkbox"/> ICL #30	<input type="checkbox"/> ICL #31	<input type="checkbox"/> ICL #32

**Pre-Courses**

**Saturday, June 3, 2017**

	Early By February 28, 2017	Standard By April 30, 2017	Onsite After April 30, 2017
<input type="checkbox"/> Pre-Course day includes admission to a Morning and an Afternoon Pre-Course. Please select one Morning Pre-Course and one Afternoon Pre-Course. First-come, first-served, limited capacity.	US \$200	US \$225	US \$250

**Morning:**

- The Knee: Maximizing Surgical Procedures in the Active and Athletic Patient
- The IOC Prevention of Injuries and Illnesses in High Level Athletes
- Current Concepts in Shoulder Surgeries

**Afternoon:**

- Advanced Course on Knee Arthroplasty
- The Use of Biologics to Treat Sports Medicine Pathology
- Evaluating Athletes with Hip and Groin Problems

**Visa Invitation Letter**

<input type="checkbox"/> Letter – Electronic Copy / PDF	FREE
<input type="checkbox"/> Letter – Original Copy / Embossed / Airmailed	US \$100
<input type="checkbox"/> Letter – Do Not Need	N/A

**Visa Invitation Letter for Spouse or Family Member** (Chinese Visa required for most foreigners)

<input type="checkbox"/> Spouse / Family Member Letter – Electronic Copy (PDF)	US \$20
<input type="checkbox"/> Spouse / Family Member Letter – Printed Original Delivered via Express Mail	US \$100

**Social Activities**

<input type="checkbox"/> Welcome Reception	No Additional Fee – Included in Registration		
<input type="checkbox"/> Spouse and Guest Morning Café	US \$100	US \$100	US \$125

**TOTAL \$**

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Please include the names of all accompanying persons for use in the spouse directory:

**PUBLISH INFO IN SPOUSE DIRECTORY**  YES  NO

FIRST (GIVEN) NAME	LAST (SURNAME) NAME	FIRST (GIVEN) NAME	LAST (SURNAME) NAME
FIRST (GIVEN) NAME	LAST (SURNAME) NAME	FIRST (GIVEN) NAME	LAST (SURNAME) NAME
CITY	STATE / PROVINCE	COUNTRY	E-MAIL

**TOTAL \$**

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## ISAKOS IMAGE / LIKENESS / VOICE RELEASE

I understand and agree that, as a result of participating as an ISAKOS meeting attendee and/or exhibitor, my image, likeness or voice may be photographed and/or recorded. If family members are attending the meeting with me, their image, likeness and voice may also be photographed and/or recorded. I hereby grant irrevocable and unrestricted permission to ISAKOS and its staff to use my or my family's image, likeness or performance in any medium and for any purpose they deem appropriate. I hereby waive any right to inspect or approve such use of materials. Submission of this Registration Form acknowledges acceptance of these terms.

## METHOD OF PAYMENT (contact the ISAKOS Office for wire transfer information)

**MAIL THIS FORM AND PAYMENT TO:** ISAKOS, 2410 Camino Ramon, Suite 215, San Ramon, CA 94583 USA **OR FAX THIS FORM TO:** +1 (925) 807-1199

Check (make check payable to ISAKOS in US Dollars drawn on US bank)  VISA  MasterCard  American Express  Discover Card

CARD NUMBER	EXP. DATE	CVV# 4 DIGITS AmEx 3 DIGITS VISA, MC, Discover
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NAME (AS IT APPEARS ON CARD)

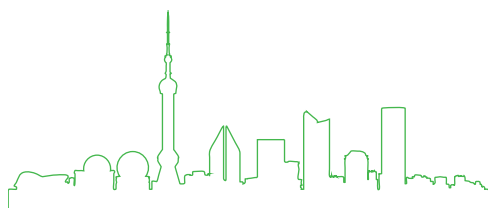
SIGNATURE (I AGREE TO PAY ACCORDING TO THE CREDIT CARD ISSUER AGREEMENT)

DATE

By signing this form, attendees allow ISAKOS to charge their credit card for the total registration amount.

Refunds will be subject to a US \$100 processing fee. Requests for refunds must be received in writing in the society office by April 1, 2017

- \* Active and Associate Members Only. Members are required to have paid all dues owed to ISAKOS. If dues are not paid prior to registering, they will be required at the time of registration.
- \*\* Allied Health and Resident/Fellow Registrants must provide proof of status prior to picking up badge onsite. Those who are unable to provide proof of status will be asked to pay the full registration price.
- \*\*\* Exhibitor representative must provide proof of affiliation (business card) with the exhibiting company and a photo ID in order to receive their badge. Badges will not be given to anyone other than the individual named on the badge.



**REGISTER ONLINE AT**  
[www.isakos.com/2017Congress](http://www.isakos.com/2017Congress)

