

# Registration

Visit [www.DeformityCourse.com](http://www.DeformityCourse.com) for the latest information.

**NOTE: You can enroll in any pre- or post-course without taking the Baltimore Limb Deformity Course. Last year's courses sold out, so early registration is advised.**

## Course Fees

### Baltimore Limb Deformity Course

Thursday, August 22 – Saturday, August 24

- |   |         |
|---|---------|
| <input type="checkbox"/> U.S. Physician/Podiatrist      | \$1,695 |
| <input type="checkbox"/> Non-U.S. Physician             | \$1,425 |
| <input type="checkbox"/> Resident/Fellow/Allied Health* | \$1,275 |

Select your preferred lab group (Some lab groups fill up quickly. Early registration is recommended. Placement is based on lab availability when registration fees are paid in full.):  Adult Orthopedics  Pediatrics  Foot and Ankle

### iPad Rental Reservation

Reservation required in advance for 3-day iPad rental. A \$200 cash deposit is required at pick-up and will be refunded if iPad is returned in good condition no later than 6:00 p.m. on Saturday, August 24. \$70 + \$ \_\_\_\_\_

### Welcome Dinner

Thursday, August 22: Course attendees receive one dinner ticket with registration.

- |  |                          |
|--|--------------------------|
| <input type="checkbox"/> Additional Welcome Dinner Tickets | \$100 x _____ = \$ _____ |
|--|--------------------------|

**Subtotal** = \$ \_\_\_\_\_

## Pre-Courses

**Because the pre-courses are offered simultaneously, registrants may select only one. If full payment is not received, your name will be placed on a wait list and the course may be sold out when fees are finally paid.**

- |  |       |
|--|-------|
| <input type="checkbox"/> <b>Cadaver Lab: To the Tibia and Below!</b> | \$995 |
|--|-------|

Wednesday, August 21 **Limited Registration**

Included in registration fee:

- Bone Ninja Scrubs – Select Size:  S  M  L  XL  XXL

- |   |         |
|---|---------|
| <input type="checkbox"/> <b>Cadaver Lab: Complex Pediatric Hip/Pelvis Surgery</b> | \$1,250 |
|---|---------|

Wednesday, August 21 **Very Limited Registration**

Included in registration fee:

- Bone Ninja Scrubs – Select Size:  S  M  L  XL  XXL

### Ponseti @ 20

Wednesday, August 21 **Limited Registration**

- |   |       |
|---|-------|
| <input type="checkbox"/> Physician/Podiatrist           | \$695 |
| <input type="checkbox"/> Resident/Fellow/Allied Health* | \$475 |

## Post-Course

### Six-Axis Deformity Correction: Boot Camp

Sunday, August 25 **Limited Registration**

- |   |       |
|---|-------|
| <input type="checkbox"/> Physician/Podiatrist           | \$525 |
| <input type="checkbox"/> Resident/Fellow/Allied Health* | \$425 |

**Pre-/Post-Course Subtotal** = \$ \_\_\_\_\_

### Late Fee

A \$200 late fee will automatically apply to all payments received or postmarked after July 21, 2019 \$200 + \$ \_\_\_\_\_

### Bone Ninja App Discount

Do you already have the Bone Ninja app loaded on your iPad?\*

- |   |                 |
|---|-----------------|
| <input type="checkbox"/> If yes, deduct \$50 from your registration fee   | \$50 – \$ _____ |
| <input type="checkbox"/> If no, deduct \$50 from your registration fee and visit the App Store to purchase the app on your own (cost: \$50) | \$50 – \$ _____ |

### Multiple Course Discount

Deduct \$50 if you are a paid registrant of the three-day Deformity Course plus one or more Pre- or Post-Courses \$50 – \$ \_\_\_\_\_

**TOTAL DUE** = \$ \_\_\_\_\_

**\*Residents or fellows must provide a letter from their residency or fellowship director to qualify for the reduced fee. If the letter is not received with registration, the physician/podiatrist rate will be assessed.**

**\*\*Note: The Bone Ninja app works only on iPad devices.**

## How did you hear about this course?

- |   |  |
|---|--|
| <input type="checkbox"/> AAOS Annual Meeting                                    | <input type="checkbox"/> POSNA Meeting                                   |
| <input type="checkbox"/> ASAMI Meeting  | <input type="checkbox"/> Colleagues                                      |
| <input type="checkbox"/> Controversies in Pediatric Limb Reconstruction Meeting | <input type="checkbox"/> Course Mailings                                 |
| <input type="checkbox"/> EPOS Meeting   | <input type="checkbox"/> Web Site  |
| <input type="checkbox"/> ILLRS Meeting  | <input type="checkbox"/> Internet Link                                   |
| <input type="checkbox"/> IPOS Meeting   | <input type="checkbox"/> Course E-mail Notification                      |
| <input type="checkbox"/> LLRS Meeting   | <input type="checkbox"/> Journal of Limb Lengthening & Reconstruction Ad |
| <input type="checkbox"/> Sales Representative (please specify): _____           |  |
| <input type="checkbox"/> Other Meeting/Source (please specify): _____           |  |

## Payment Methods

**You are not considered a confirmed registrant until the registration fees are paid in full. Your name will be placed on a wait list until payment has been obtained. All registrations with unpaid balances on June 15, 2019, will be cancelled automatically and re-registration will be required.**

We accept VISA, MasterCard, American Express, checks, and bank drafts payable in U.S. funds:

I wish to pay by:  credit card  check  bank draft

- To pay by credit card, you can use online, mail-in, or faxed registration.
  - For online registration, please visit our web site: [www.DeformityCourse.com](http://www.DeformityCourse.com).
  - For faxed registration, please fax this form to 1.410.601.0585.

- To pay by check, make checks payable in U.S. funds to "Baltimore Limb Deformity Course/Sinai" and mail to:

Madeline Bacon  
Baltimore Limb Deformity Course  
Rubin Institute for Advanced Orthopedics  
Sinai Hospital of Baltimore  
2401 West Belvedere Avenue  
Baltimore, Maryland 21215 USA

- To pay by bank draft, contact Madeline Bacon to obtain instructions. (E-mail: [mbacon@lifebridgehealth.org](mailto:mbacon@lifebridgehealth.org) or tel: 1.410.601.9798)

For mail-in or faxed registration, PLEASE COMPLETE LEGIBLY:  
(NOTE: E-mail address is required; one form per registrant.)

Credit Card Type:  VISA  MasterCard  American Express

Credit Card Number: \_\_\_\_\_

Security Code: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_

Signature of Cardholder: \_\_\_\_\_

Cardholder's E-mail (required): \_\_\_\_\_

Full Name of Registrant: \_\_\_\_\_

Professional Degree (e.g., MD): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone Number: \_\_\_\_\_

*If outside of the U.S., please include country and city codes*

Fax: \_\_\_\_\_

*If outside of the U.S., please include country and city codes*

Registrant's E-mail (required): \_\_\_\_\_

## Cancellation Policy

A refund (less a \$75 administrative charge) will be extended for written cancellations postmarked on or before May 31, 2019. Refunds made in response to written cancellations with a June 1 through June 30, 2019, postmark will incur a \$200 cancellation fee. No refunds will be made for cancellations that are postmarked July 1, 2019, or later, and no refunds will be made in response to verbal cancellations at any time.

## Photo Policy

We will be taking photographs at this event. LifeBridge Health may publish photographs of you for educational, promotional, or advertising purposes. By enrolling in any of the courses provided by LifeBridge Health, you are agreeing to the use of your image for these purposes.

The 2018 Course was made possible through educational grant and in-kind equipment support from:

**Avitus Orthopaedics • CyMedica Orthopedics • DePuy Synthes  
MHE Coalition • NuVasive Specialized Orthopedics • Orthofix  
OrthoPediatrics • Paragon 28 • Smith & Nephew  
Stryker • Vilex • Zimmer Biomet**