

# Neurocritical Care

## REVIEW COURSE

### Choose from four easy ways to register:

For orders placed online or by phone, please have your credit card and customer ID ready.

**1. Online:** [sccm.org/neuroreview](http://sccm.org/neuroreview)   **2. Phone:** +1 847 827-6888   **3. Fax:** +1 847 439-7226

**4. Mail:** SCCM, 35083 Eagle Way, Chicago, IL 60678-1350, USA

Please type or print clearly. Please keep a copy of this form for your records.

Customer ID#: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name/Surname: \_\_\_\_\_  Male  Female

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

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_ Address Type:  Home  Office

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Please list all your degrees/credentials (e.g., ACNP, MD, PharmD, RN, RRT, etc.): \_\_\_\_\_

Please list your primary license/board certification (e.g., Registered Nurse, Internal Medicine): \_\_\_\_\_

Please list your primary license/board certification year (e.g., 2001): \_\_\_\_\_

### Course Registration Fees:

#### SCCM Members

- Associate member .....\$ 595
- Professional member .....\$ 575
- Select member .....\$500

#### Nonmembers

- Nonmember.....\$ 625

### Payment Information:

Please send payment with registration form. Inquiries can be e-mailed to [support@sccm.org](mailto:support@sccm.org). If credit card information is provided, please fax to this secure number: +1 847 439-7226. *E-mailing credit card information is not a secure method of transmission. SCCM is in compliance with PCI best practices.*

**Check** (must be U.S. funds drawn on a U.S. bank)

**Credit Card:**  American Express  Discover  MasterCard  Visa

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV: \_\_\_\_\_

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

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Any incomplete or missing information will delay the order.*

*If you require any special assistance related to a disability, diet, or other needs, please contact SCCM Customer Service by email at [support@sccm.org](mailto:support@sccm.org) or by phone at +1 847 827-6888, Monday through Friday between 8:00 a.m. and 5:00 p.m. Central Time, to discuss specific requirements.*

Cancellations must be submitted in writing. All cancellations are subject to a \$75 nonrefundable processing fee and must be postmarked before March 23, 2021, to be eligible for a refund. Cancellations postmarked after this date will not be refunded. Dates for Neurocritical Care Review Course are subject to change and/or cancellation. In the event of cancellation, only individual registration fees will be reimbursed. Please allow four weeks to process refunds.