

## REGISTRATION FORM: FLORIDA CE REQUIREMENTS SPECIAL

**Cancellations:** There are no cancellations or refunds once you have registered for a course. **NO EXCEPTIONS.** If you need to change the day or time of your course, there is a \$25 change fee. By registering for the course you are agreeing to these terms.

**Confirmation of payment** will be EMAILED to you once payment has been processed. Please place *education@psseyecare.com* on your safe list.

### REGISTRATION FEES

#### Florida Requirements Special - 8 CE hours for \$250

Includes 8 total FL board hours which is divided into the 2 hour Medical Errors course and 3 TQ courses (6 hours total). The speaker for all courses is Dr. Deepak Gupta.

#### Schedule:

Monday	Dec 14: 7-9pm	Medical Errors
Tuesday	Dec 15: 7-9pm	Keratoconus TQ
Wednesday	Dec 16: 7-9pm	Glaucoma Diagnosis TQ
Thursday	Dec 17: 7-9pm	Glaucoma Management TQ

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE & ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

FL LICENSE # \_\_\_\_\_ OE TRACKER # \_\_\_\_\_

**HANDOUTS can be downloaded and printed from our website one week prior to the meeting.**

**TOTAL FEES TO BE PAID** \_\_\_\_\_

#### **PAYMENT METHOD (Registration is not confirmed until payment is received):**

If paying by check, make payable to PSS Eye Care and mail with form to address below.

**If paying by credit card, fill out form and fax, mail, or email and we will email you a link to pay online.**

#### **MAIL REGISTRATION FORM TO:**

**PSS EyeCare \* 19 Rollins Crossing \* Pittsford, NY 14534 OR FAX TO: (585) 310-7382**

**Phone: (203) 415-3087 Email: [education@psseyecare.com](mailto:education@psseyecare.com) [www.psseyecare.com](http://www.psseyecare.com)**