



Regional Osteopathic Convention – New York

May 4 – 7, 2023 | Hyatt Regency Long Island Hotel

Registration Form

Full Name (please print legibly)		AOA #
Address (Street, City, State, Zip Code)		
Phone (Office <input type="checkbox"/>) (Home <input type="checkbox"/>) (Cell <input type="checkbox"/>)		Email (Important for convention/program updates)
FULL CONFERENCE RATE - 4 DAY (please circle)		EARLY BIRD / Register By: 3/17/2023
		Register Between: 3/18 - 4/20/2023
Active NYSOMS Member (or local State Society)		\$685
Non-NYSOMS Member (or local State Society)		\$885
Life/Retired NYSOMS Member		\$485
Other Healthcare Provider (Nurse, PharmD, PA, NP, etc)		\$435
SINGLE DAY RATES (please circle)		
Active Member - Thurs / Fri / Sat		\$250
Active Member - Sunday		\$150
Non-Member – Thurs / Fri / Sat		\$325
Non-Member - Sunday		\$225
Intern / Resident / Fellow (Friday only)		FREE
Intern / Resident / Fellow (Thurs / Sat / Sun)		\$50
Student (Thurs / Fri / Sat / Sun) // COM Attending: _____		FREE
Late Registration Fee - After April 20, 2023		\$75
SPECIAL OPTIONAL WORKSHOPS (runs concurrently with lectures)		
• Leadership Workshop (Thursday, May 4 th 1:15 – 3:15 pm) (certificate issued)		\$50
• OMM Workshop (Fri, May 5 th 8:00 - 10:00 am) <i>Highly Efficient Techniques for Commonly Misdiagnosed Issues in a Primary Care Office</i>		\$75
• OMM Workshop (Sat, May 6 th 2:30–4:30 pm) <i>Assessment & Treatment of Common Muscle Imbalances That Impact Posture</i>		\$75
OPTIONAL PROGRAM: FL License Renewal Required Live Courses (Sunday, May 7th 1:15-4:15 pm) (immediately following conclusion of ROC-NY) *3 Hours Anticipated (In person OR Zoom)		
• NYSOMS member & ROC-NY Attendee		\$180
• NYSOMS member (FL program only)		\$225
• Non-member & ROC-NY Attendee		\$280
• Non-member (FL program only)		\$325
MEMBERSHIP - RENEW or JOIN		
• NYSOMS Active Membership (through 4/30/2024)		\$200
Will you attend the President's Reception? (Friday, May 5 th at hotel)*Complimentary ticket for Registrant & 1 Guest (\$125 each additional guest)		Attending? Yes No
Name of Guest:		TOTAL REGISTRATION AMOUNT: \$
PAYMENT METHOD		
<input type="checkbox"/> Check (Payable to: NYSOMS)		<input type="checkbox"/> AMEX <input type="checkbox"/> Discover <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa
Credit Card Number		Exp Date
		CVV Code

Mail to: NYSOMS, Attn: (ROC-NY 2023), PO BOX 8000, Old Westbury, NY 11568
 Email: nysoms@nysoms.org Call: 212-261-1784 Fax: 516-686-3767

This program anticipates being approved for 29.5 AOA Category 1-A CME credits.

Full refund minus \$50.00 processing fee for cancellation received on or before April 7, 2023 in writing. All grievances should be directed to: Executive Director, NYSOMS, NYIT de Seversky Mansion, Room 107, Old Westbury, NY 11568. If at any point, NYSOMS has to cancel the event, NYSOMS will issue a full refund. If the event is switched to a virtual platform, the attendee will be given the option of a refund.