

2024 Registration

Registration closes August 7, 2024.

NOTE: You can enroll in any Pre- or Post-Course without taking the three-day Course. Early registration is recommended as courses may sell out quickly.

Course Fees

Baltimore Limb Deformity Course

Thursday, August 22 - Saturday, August 24, 2024

- U.S. Physician/Podiatrist \$1,745
 Non-U.S. Physician \$1,545
 Resident/Fellow/Allied Health* \$1,325

Some afternoon hands-on lab groups fill up quickly. Early registration is highly recommended. Placement is based on lab availability when registration fees are paid in full. Those who do not select a lab group will be assigned to the Adult Orthopedics group. NOTE: All lecture-based break-out sessions that focus on pediatric, adult, and foot/ankle issues are available to all participants. Select your preferred lab group:

- Adult Orthopedics Pediatric Orthopedics Foot and Ankle

Multiple Course Discount

-\$50 \$ _____

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

Thursday Welcome Dinner

One Reception ticket is included in your registration fee for the three-day Course. Additional tickets may be available for purchase on-site.

Dietary Restriction: Vegetarian Kosher Gluten-free Vegan

Subtotal = \$ _____

Pre- and Post-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 waitlist risking the possibility of the Course selling out before fees are fully paid.

Wednesday, August 21, 2024

- Pre-Course | Management of Complex Segmental Bone Defects: A to Z \$750
 Pre-Course | Cadaver Lab: Complex Pediatric Hip/Pelvis/Femur Surgery \$1,375
★ Select size of Bone Ninja scrubs (included in registration fee; note: scrubs run large):
 Small Medium Large Extra Large Extra Extra Large
 Pre-Course | Basics of External Fixation in the Foot and Ankle \$500

Sunday, August 25, 2024

- Post-Course | Cadaver Lab: Disaster Response
 Physician/Podiatrist \$500
 Resident/Fellow/Allied Health* \$450
★ Select size of Bone Ninja scrubs (included in registration fee; note: scrubs run large):
 Small Medium Large Extra Large Extra Extra Large

Pre-/Post-Course Subtotal = \$ _____

Late Fee

A \$100 late fee will automatically apply to all new or unpaid registrations of the Course after August 1, 2024. +\$100 \$ _____

TOTAL DUE = \$ _____

*Residents and 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.

How Did You Hear About This Course?

- AAOS Annual Meeting IPOS Meeting
 ASAMI Meeting LLRS Meeting
 Controversies in Pediatric Limb Reconstruction Meeting POSNA Meeting
 EPOS Meeting Colleagues
 Course Email Notification
 Essentials of Lower Extremity Reconstruction Course (Dallas) Course Mailings
 Journal of Limb Lengthening & Reconstruction Ad
 ILLRS Meeting
- Website: Orthobullets OrthoMedia VuMedi Other (please specify): _____

Sales Representative (please specify): _____

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 waitlist until payment has been obtained. All registrations with unpaid balances two weeks after registration will be cancelled automatically and re-registration will be required. Courses may sell out quickly.

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, see below or use online, mail-in, or fax registration.

★ For online registration, please visit our website: DeformityCourse.com.

★ For fax 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:

Wendy R. Robinson, MEd

Rubin Institute for Advanced Orthopedics

Sinai Hospital of Baltimore, Inc.

2401 West Belvedere Avenue

Schoeneman Bldg., Suite 102

Baltimore, Maryland 21215 USA

★ To pay by bank draft, contact Wendy R. Robinson, MEd to obtain instructions. (Email: wrobbins@lifebridgehealth.org or tel: +1.410.601.9798)

For mail-in or fax registration, PLEASE COMPLETE LEGIBLY:

(Note: Email 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 Email (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

Registrant's Email (required): _____

Cancellation Policy

A refund (less a \$50 administrative fee) will be extended for email cancellations sent to LBH_BLDLC@lifebridgehealth.org dated on or before July 31, 2024. No refunds will be made for cancellations that are dated August 1, 2024 or after, and no refunds will be made in response to verbal cancellations at any time.

If an unforeseen circumstance/force majeure occurs and we must cancel the courses, we will provide our participants with as much advance notice as possible and refund 100% of your registration payment.

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.

Use of Your Personal Information

By registering for this event, you authorize us to include your name and address in an attendee list we may provide to our corporate partners and exhibitors in advance of and/or following the Course. In addition, you agree to allow us to send you periodic email announcements concerning future courses and our educational app updates. To opt out, please email LBH_BLDLC@lifebridgehealth.org. It may take a few days for you to receive written confirmation that your name has been removed from both the attendee list and/or the email notification list.