

# Educational Activity Participation Form



37th Annual Conference  
**ORLANDO**  
**2012**



Improving Professional Competence, Provider Performance, and Patient Care  
Saturday–Tuesday, January 21–24, 2012  
Grande Lakes Orlando—The Ritz-Carlton® and JW Marriott®, Orlando, Florida

## Hours

- The Alliance for Continuing Medical Education designates this educational activity for a maximum of 25 hours.
- The reporting of participation hours is on an honor system and hour-for-hour basis.
- Claim only the hours commensurate with your participation in this educational activity.

## Form

- Complete the following interactive form.
- Make sure to provide your e-mail address (as this is how your participation certificate will be sent to you).
- Save an electronic copy of your completed form.

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Degree: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Hours Claimed (Daily):

- Saturday AM, 01/21/12: \_\_\_\_\_ (3.5 Hours Maximum) **(If You Paid for/Participated in a Fee-based Intensive)**
- Saturday PM, 01/21/12: \_\_\_\_\_ (3.5 Hours Maximum) **(If You Participated in a Member Section Meeting)**
- Sunday AM, 01/22/12: \_\_\_\_\_ (2.5 Hours Maximum)
- Sunday PM, 01/22/12: \_\_\_\_\_ (3.0 Hours Maximum)
- Monday AM, 01/23/12: \_\_\_\_\_ (3.0 Hours Maximum)
- Monday PM, 01/23/12: \_\_\_\_\_ (3.0 Hours Maximum) **(If You Also Participated in a Member Section Follow-up Meeting)**
- Tuesday AM, 01/24/12: \_\_\_\_\_ (3.0 Hours Maximum)
- Tuesday PM, 01/24/12: \_\_\_\_\_ (3.5 Hours Maximum) **(If You Paid for/Participated in a Fee-based Intensive)**

Hours Claimed (Total): \_\_\_\_\_ (25.0 Hours Maximum)

## Submission

You may submit your completed/saved form by

- **E-mail/attachment** to Diane Baker O'Hern at [dbaker@acme-assn.org](mailto:dbaker@acme-assn.org);
- **Fax** to Attention: Diane Baker O'Hern at 205/824-1357, **or**
- **United States Postal Service** to Diane Baker O'Hern, Professional Development Manager, Alliance for Continuing Medical Education, 1025 Montgomery Highway, Suite 105, Birmingham, AL 35216

## Deadline

The deadline for **receipt** of your completed form is 5:00 pm CST, Friday, February 24, 2012.

## Certificate

Upon receipt of your completed form and as soon as possible, an educational activity participation certificate will be sent by e-mail/attachment to the e-mail address you listed above.

For your records, please save a copy of that certificate **and** the *Final Program*, both of which can serve as backup documentation of your participation in this educational activity.

Alliance for Continuing Medical Education®  
1025 Montgomery Highway, Suite 105, Birmingham, AL 35216, Tel: 205/824-1355, Fax: 205/824-1357, Web Site: [www.acme-assn.org](http://www.acme-assn.org)

