THE RURAL & REMOTE MEDICINE COURSE EARLY BIRD REGISTRATION FORM

19TH RURAL & REMOTE MEDICINE COURSE COMES TO RURAL ONTARIO
BLUE MOUNTAIN RESORT, NEAR COLLINGWOOD ON MAY 5TH - 7TH, 2011

R&R is a family-friendly course, with almost 200 sessions covering a wide range of rural-relevant topics. We will offer small-group, peer-to-peer teaching, our hallmark Rural Critical Care modules, small hands-on sessions and plenary sessions that offer practical solutions and support.

Join The Society of Rural Physicians of Canada and receive reduced course fees

Annual Dues: Active - \$390* / Non-MDs - \$100 Retired - \$50 / Residents - \$20 Students - Free

*Dues waived for doctors in 1st year of practice in rural or remote Canada

WHAT PEOPLE ARE SAYING ABOUT R&R 2010

My first R&R course exceeded my expectations
Good times to recharge rural medicine batteries.
Loved the baby sitting availability!!
Very varied topics, well organized, small enough groups for discussion.



REGISTER EARLY & GET LAST YEAR'S PRICES GUARANTEED UNTIL JAN. 1, 2011 APPLICABLE TAX NOT INCLUDED Number of Days Attending 3 | 2 | 1 \$825 \$700 \$525 SRPC Members - MDs \$995 | \$875 | \$700 Non-SRPC Members Members - Residents, Non-MDs & Retired \$550 \$460 \$350 \$275 \$230 \$175 Members - Students Number of days \$250 Deposit Subsidize a Resident SRPC Dues **Authorized Amount** I'M AN UNFUNDED RESIDENT TRAVELING FROM OUT OF REGION AND WOULD LIKE TO APPLY FOR A \$100 REBATE FROM THE SRPC \square I WISH TO CONTRIBUTE TO LOWERING FEES FOR RESIDENTS AND WILL

BE A PART OF R&R GET INVOLVED

•Submit a poster abstract
•Enter the student/
resident essay contest

Suggest a new topic/speaker

Get involved as faculty

E-mail us at: rrsubmissions@cjrm.net



So much to do and see!

SUBSIDIZE A RESIDENT WITH THE INDICATED AMOUNT ABOVE \square

Blue Mountain Resort, 108 Jozo Weider Blvd. Blue Mountains, ON L9Y 3Z2
You can visit the waterfront at Georgian Bay, or take a trip up Blue Mountain in the open-air gondola,
Blue Mountain has everything from exciting outings to relaxing spas!

Name		
	Mr. \square Miss. \square Ms. \square	Mrs. \square Dr. \square Student \square Resident \square RN/NP \square
Address		
Town, Province		Postal Code
Phone	Fax	E-mail
Payment by:	MC / Visa #	Expiry
☐ Cheque	☐ Invoice ☐ Credit Card	
Authorized Signature		