

AMERICAN EYE STUDY CLUB - 2019

62nd ANNUAL MEETING REGISTRATION FORM

Fairmont Southampton - Bermuda ❖ July 30 - August 4, 2019

Please complete this form for yourself and any spouses/guests, children or others who will be attending the meeting events. Return your registration with your payment to the American Eye Study Club, 10 W. Phillip Rd., Suite 120, Vernon Hills, IL 60061. A postage-paid envelope is enclosed. If paying by credit card, you may fax your form to: 847/680-1682. *Questions?* Call the Club office at 847/680-1666 or send email: Rich@RichardPaulAssociates.com

PLEASE PRINT !!!

Member's name: _____

Spouse/guest name(s) attending: _____

Children names & ages attending: _____

Planned arrival date: _____ Planned departure date: _____

Indicate the **total** number of individuals attending the meeting below. Enter the registration fee amount due in the far right column plus the grand total at the bottom. If you are an Emeritus member attending just part of the meeting (Tuesday through Thursday or Thursday through Saturday), enter the 25% discount in the space provided.

Event	Cost	# of Individuals Attending			\$ Total
		Member	Spouse/Guest	Children	
AESC meeting registration <i>(includes all group meals & receptions)</i>	Club Member	\$835			\$
	Spouse & adult guests age 18 and older	\$735 per person			\$
	Children	\$375 (13-17)			\$
\$120 (5 - 12) < 5 free					
Emeritus member "weekend" discount for (Thursday-Saturday) – DEDUCT 25% →					
Grand Total - Registration fees →					\$

Form of Payment: Check (*payable to: "American Eye Study Club"*) Visa MasterCard Discover American Express

Credit Card # Exp. Date /

Security Code (3 or 4 digits)

Name on card: _____

Billing address for card: _____

Signature _____