

## **Annual Meeting Registration Form**

Southern Orthopaedic Association's 42nd Annual Meeting July 23-26, 2025 • JW Marriott Marco Island • Marco Island, FL www.soaassn.org • Phone: 866-762-0730 • Fax: 410-494-0515

Name	Degree	Sub-Specialty	
Company/Institution	Department		
Address	City	State	ZIP

Office Phone

Email Address

Hiring?

Advertise your

open position at

the Annual

Meeting!

Looking for a new job? Post your contact information anonymously for

employers to contact you at the Annual Meeting.

Scan the code below to sign up!

Physician/Allied Health Registration Fee Includes: Scientific Sessions, Scientific Poster Sessions, Symposia, Continental Breakfasts, Workshops, Breaks, Welcome Dinner, Exhibitor Reception, and Beach Party.

**Spouse/Guest Registration Fee Includes:** Spouse/Guest/Child Hospitality Thursday-Saturday, Welcome Dinner, Exhibitor Reception, and Beach Party.

Child Registration Fee Includes: Spouse/Guest/Child Hospitality Thursday-Saturday, Welcome Dinner, Kids' Bowling Party and Beach Party.

#	Registrant Category	Fee
	SOA Member Physician	S845
	Non Member Physician Free year of SOA membership included!	\$1,145
	Non Member Physician Presenter	\$845
	Emeritus Member	\$450
	Active Duty Military	\$250
	Allied Health Professional	\$400
	Fellow	\$200
	Resident	\$200
	Medical Student	\$200

#	Guest Category	Fee
	Spouse/Guest (18+)	\$225
	Child(ren) 5-17 years	\$35
	Child(ren) under 5 years	No Charge

Please provide the information below for each of your adult guests so we can include their name badges in your registration packet. Registered children (5-17) will receive a wristband.

Spouse/Guest Name	City	State
Guest Name	City	State
Guest Name	City	State

## Spouse/Guest Email Address for Meeting Updates

**CANCELLATION POLICY:** Full refund (less S50 administrative fee) will be granted if a cancellation is made prior to 10 business days before the meeting date; a 50% refund if canceled between 5 and 10 business days before the meeting date. No refund will be granted within 5 business days of the meeting, or anytime thereafter.

**Tour/Activity Ticket Cancellation Policy:** Full refund will be granted if a cancellation is made prior to 30 business days before the meeting date. No refund will be guaranteed within 30 business days of the meeting. SOA will attempt to sell unwanted tickets on a first-come, first-served basis. If SOA successfully sells your unwanted ticket, you will receive a full refund of the ticket cost. SOA reserves the right to cancel an activity if the minimum number of participants has not purchased tickets prior to 30 business days before the meeting date.

□ SPECIAL NEEDS: If you have hearing, vision or mobility impairment and need appropriate accommodations in order to participate fully in this activity, check here and notify us by July 1, 2025. You will be contacted by the SOA Management Company, DTMS, to discuss your needs.

#	Tours/Activities	Fee		
	Offshore Fishing - Wed 7/23 (\$490)			
	Sailing & Shelling Excursion - Wed 7/23 (S84)			
	Shopping Excursion to Naples - Thu 7/24 (S145)			
	Pickleball Workshop & Happy Hour - Thu 7/24 (S100)			
	10,000 Islands Wave Runner Tour - Thu 7/24 (S390 per jetski)			
	The Bubba Armstrong Clay Shoot - Fri 7/25 (S290)			
	Golf Tournament at Hammock Bay - Fri 7/25 (\$295)			
	Mediterranean Mixology Class - Fri 7/25 (\$145)			
	Guided Kayak Tour through the Mangroves - Sat 7/26 (\$185)			

**ONLY** complete the section below for **unregistered** spouses, guests, and children who wish to attend the events. These events are already included for **registered** spouses, guests and children.

#	Unregistered Guest Events	Fee			
	Yoga - (Complimentary) - Thu				
	Spouse/Guest/Child Hospitality - Adult (\$40) - Thu				
	Spouse/Guest/Child Hospitality - Child 5-17 (S20) - Thu				
	Flower Arranging Workshop at Hospitality - (Complimentary) - Thu				
	Welcome Dinner - Adult (\$100) - Thu				
	Welcome Dinner - Child 5-17 (\$50) - Thu				
	Yoga - (Complimentary) - Fri				
	Spouse/Guest/Child Hospitality - Adult (S40) - Fri				
	Spouse/Guest/Child Hospitality - Child 5-17 (S20) - Fri				
	Exhibitor Reception - Adult (S75) - Fri				
	Kids' Party at 10K Alley (S25) - Fri				
	Yoga - (Complimentary) - Sat				
	Spouse/Guest/Child Hospitality - Adult (S40) - Sat				
	Spouse/Guest/Child Hospitality - Child 5-17 (S20) - Sat				
	Tides and Tunes Beach Party - Adult (S100) - Sat				
	Tides and Tunes Beach Party - Child 5-17 (S50) - Sat				

## Physician/Allied Health Registration Fee \$\_\_\_

- Guest Registration Fees \$\_\_\_\_\_
  - Tours/Activities Fees \$\_\_\_\_\_
- Unregistered Guest Event Fees \$\_\_\_\_\_
  - TOTAL \$\_\_\_\_\_

ZIP

Check Enclosed	d (payable t	o Southern C	Orthopaedi	c Associatio	n)
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	VISC	MasterCara		3
Credit Card Number	 	 	Expiration Date	CW

City

Name on Card

Billing Address

State

 $\hfill\square$  I would like to opt out of receiving promotional emails.

Do not share my information with third party vendors.