

Oregon Society Medical Assistants ANNUAL CONFERENCE 2024

Thursday, May 9th – Saturday, May 11th, 2024



Registration Form

A huge **THANK YOU** to the **SPONSORS** of the
Oregon Society Medical Assistants Conference

Without your support, functions such as this, would not be possible.

With everyone's safety in mind, we will follow the local, state, or CDC guidelines,
current at the time of the Conference*

*which ever is the most strict

OSMA ANNUAL CONFERENCE May 9th -11th, 2024
Sheraton Portland Airport Hotel | 8235 NE Airport Way, Portland, OR 97220

Note: If you have any allergies that would impact your participation in the conference, such as food allergies (including peanuts, tree nuts, or seafood) please provide us with notice of such allergies. While we will use reasonable efforts to accommodate your special needs, we shall not be responsible for any damages, additional cost, or losses to you as a result of any party's – another attendee, the hotel, a caterer, or conference vendor – failure to accommodate your needs.

Note: We will attempt to accommodate reasonable dietary needs, but we cannot provide for every individual's special diet.

Hotel Information:

Sheraton Portland Airport Hotel

8235 NE Airport Way, Portland, OR 97220

Reservations: Guestroom reservations may be made using this link:

<https://www.marriott.com/event-reservations/reservation-link.mi?id=1696265882480&key=GRP&app=resvlink>

Or by calling the hotel directly at 503-281-2500 and requesting the **Oregon Society Medical Assistants (or OSMA) group block**.

Make reservations **by April 26th** in order to get the conference rate (below). Reservations received after this date will be accepted on a space/rate available basis.

Room rate:

\$159 USD per night

Conference Registration Information:

Types of Registration:

Package registrations for AAMA members, Non-Members and Students include entrance to all CEU sessions, planned lunches and dinner. *(All breakfasts, and Thursday and Saturday dinners are on your own.)*

One day registrations in all categories include entrance to all CEU sessions and lunch for that day.

Registration deadlines are clearly stated on the registration form. Please submit early for best rates.

We must have our meal counts ahead of time. Post-marked after April 1/on-site/same day registrations will **not include meals**.

Saturday evening, May 11th is a post conference Board meeting for incoming and outgoing OSMA officers. All OSMA members are welcome to attend.

Questions? Please contact:

Paula Purdy, CMA (AAMA) paula@myteammedicalstaffing.com

or

Christy Oldenstadt, CMA (AAMA) christyocma@outlook.com

Please put **CONFERENCE 2024** in the subject line to receive a prompt response.

OREGON SOCIETY OF MEDICAL ASSISTANTS ANNUAL CONFERENCE ~ May 9-11, 2024



Total Payable in US funds to: Oregon Society Of Medical Assistants. Mail the completed registration, a copy of 2024 AAMA membership card (plus student ID) and funds to: Johnny Adamson, CMA AC (AAMA), 13350 SE 162nd, No. 152, Clackamas, OR 97015 (This is a secure locked mailbox.) **Option:** Email to johnnyvee83@gmail.com

Please Print clearly:

Name (include credentials): _____ AAMA Member ID# _____

Address: _____ City: _____ State: _____ Zip: _____

Phone number : (____) _____ **E-Mail:** _____

(Email required to complete registration)

Current State Position _____

| REGISTRATION fee is NOT REFUNDABLE May be transferred to another attendee for this event only | EARLY BIRD Postmarked by 3/30/24 | STANDARD Postmarked 3/31/24 – 4/27/24* |
|--|---|--|
| AAMA Member** Thursday/Friday/Saturday Pkg (includes 3 lunches, Fri dinner) | \$ 225 | \$ 275 |
| AAMA Member** Thur/Fri or Fri/Sat Pkg (includes 2 lunches, Fri dinner) CIRCLE which 2 days | 175 | 225 |
| AAMA Member** One day rate (includes lunch) Which day are you attending? _____ | 115 | 140 |
| Non-Member Thursday/Friday/Saturday Pkg (includes 3 lunches, Fri dinner) | 325 | 375 |
| Non-Member Thur/Fri or Fri/Sat Pkg (includes 2 lunches, Fri dinner) CIRCLE which 2 days | 275 | 325 |
| Non-Member One day rate (includes lunch) Which day are you attending? _____ | 175 | 200 |
| AAMA Member Student** Thursday/Friday/Saturday Pkg (includes 3 lunches, Fri dinner) | 120 | 150 |
| AAMA Member Student** Thur/Fri or Fri/Sat Pkg (2 lunches, Fri dinner) CIRCLE which 2 days | 95 | 115 |
| AAMA Member Student** One day rate (includes lunch) Which day attending? _____ | 40 | 60 |
| Non-Member Student** Thursday/Friday/Saturday Pkg (includes 3 lunches, Fri dinner) | 150 | 170 |
| Non-Member Student** Thur/Fri or Fri/Sat Pkg (2 lunches, Fri dinner) CIRCLE which 2 days | 115 | 135 |
| Non-Member Student** One day rate (includes lunch) Which day attending? _____ | 85 | 105 |
| Extra Lunch ticket (any lunch meal) \$35 each _____ x \$35 = | | |
| Extra Dinner ticket (Friday night) \$50 each _____ x \$50 = | | |
| On-site registration fee is in addition to above fees (NO meals included) *Postmarked or emailed after April 1 will be considered "on-site" registration. | N/A | \$ 100 |

Total Amount Owed: \$ _____ \$ _____

Members must enclose a copy/photo of your **2024 AAMA Annual Membership Card (or receipt for payment of 2024 dues) with this registration form, in order to receive the AAMA member registration rates.
****ALL STUDENTS must include copy/photo of your CURRENT student ID** to receive student rates.

Payment information: _____ You can call Johnny Adamson at 503-313-4800 or write credit card information below

Credit Card info: Visa ___ Master Card ___ Discover ___ Name on card _____

Number _____ Expiration date ____/____ 3 digit security code _____

Allergies/Dietary needs? No Yes (specify) _____

Be sure to enclose (or attach to email) a copy of your 2024 AAMA membership card or receipt of payment AND Current Student ID (if enclosing student rate) with your registration form and conference payment.