



**65th ANNUAL GSMA CONFERENCE REGISTRATION (PER INDIVIDUAL)**

**APRIL 25 – 28, 2024**

**Hilton Garden Inn Atlanta NW Kennesaw Town Center - 895 Cobb Place Blvd, Kennesaw, GA 30144**

Room Reservation link: <https://www.hilton.com/en/attend-my-event/atlkegi-90i-0175ec02-1fcd-4989-a941-4716f3fd7e85/>

**Hotel Reservation Cutoff Date is March 27, 2024**

[atlantanwkennesawtowncenter.gardeninn.com](http://atlantanwkennesawtowncenter.gardeninn.com)

NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_  
 STATE OFFICER - COMM CHAIR TITLE: \_\_\_\_\_  
 \_\_\_\_\_  
 CHAPTER \_\_\_\_\_ MEMBER # \_\_\_\_\_  
 PHONE # (required) \_\_\_\_\_  
 EMAIL \_\_\_\_\_

**CHECK ALL THAT APPLY**

<input type="checkbox"/> MEMBER	<input type="checkbox"/> NON-MEMBER
<input type="checkbox"/> STUDENT	<input type="checkbox"/> NEW CMA
<input type="checkbox"/> GSMA OFFICER	<input type="checkbox"/> GSMA COMM CHAIR
<input type="checkbox"/> PAST GSMA PRES	<input type="checkbox"/> STATE ADVISOR
<input type="checkbox"/> HOD DELEGATE	<input type="checkbox"/> HOD ALTERNATE
<input type="checkbox"/> GSMA LIFE MEMBER	<input type="checkbox"/> EDUCATOR
<input type="checkbox"/> PHYSICIAN	<input type="checkbox"/> GUEST SPEAKER
<input type="checkbox"/>	<input type="checkbox"/> EXHIBITOR

**PACKAGE REGISTRATION FEE\*:**

MEMBER / MEMBER SPOUSE / PHYSICIAN / STUDENT MEMBER / AND EXHIBITOR	\$195.00
NON-MEMBER / NON-MEMBER SPOUSE	\$250.00

**\*PACKAGE REGISTRATION INCLUDES THE FOLLOWING:**

FRIDAY WELCOME LUNCH	FRIDAY DINNER – LUAU HAVE FUN! DRESS FOR THE PARTY!
SATURDAY AWARDS LUNCHEON	SATURDAY DINNER – OFFICERS INSTALLATION
EDUCATIONAL WORKSHOPS	BREAKS – FRIDAY A.M. AND SATURDAY

**NOTE: BREAKFAST IS NOT INCLUDED**

	<u>NUMBER</u>	<u>TOTAL AMOUNT</u>
<b>PACKAGE REGISTRATION FEE:</b>		
MEMBER / MEMBER SPOUSE / PHYSICIAN / STUDENT		
MEMBER / AND EXHIBITOR	\$ 195.00	\$ _____
NON-MEMBER / SPOUSE	\$ 250.00	\$ _____

REGISTRATIONS POSTMARKED AFTER MARCH 31, 2024 WILL BE INCREASED TO MEMBER \$245.00 / NON-MEMBER \$300.00.

Reservations MAY NOT be Transferred to other Individuals.

**INDIVIDUAL MEAL TICKET:**

FRIDAY WELCOME LUNCH	\$40.00	_____	\$ _____
FRIDAY DINNER LUAU	\$55.00	_____	\$ _____
SATURDAY AWARDS LUNCH	\$40.00	_____	\$ _____
SATURDAY DINNER	\$55.00	_____	\$ _____

**DAILY EDUCATIONAL WORKSHOPS: DAILY FEE INCLUDES AAMA CEU'S AND LUNCH.**

MEMBER DAILY	(indicate day)		
___ FRIDAY	___ SATURDAY	\$115.00	\$ _____
NON-MEMBER DAILY	(indicate day)		
___ FRIDAY	___ SATURDAY	\$150.00	\$ _____

**TOTAL ENCLOSED:** \_\_\_\_\_ \$ \_\_\_\_\_

- An ADMINISTRATIVE fee of \$25.00 per person will be assessed for any CANCELLATION made after 3:00 pm on April 5, 2024.
- NO REFUNDS will be given after 3:00 pm on April 8, 2024 (enforced due to hotel catering policies).
- A \$40.00 fee will be assessed for any RETURNED CHECK due to INSUFFICIENT FUNDS.  
(CEU credits will be held until fees are satisfied)

MAKE CHECKS PAYABLE TO: Georgia Society of Medical Assistants, Inc. 2024 Conference  
 MAIL REGISTRATION FORM(S) AND CHECK TO:

Toni Thurman, CMA (AAMA), GSMA Conference Chair  
 3481 Hickory View Dr NW  
 Marietta GA 30064

POSTMARKED: \_\_\_\_\_  
 RECEIVED: \_\_\_\_\_