



American Orthotic & Prosthetic Association (AOPA) 2008 Audio Conferences Sign up Today!

The American Orthotic & Prosthetic Association (AOPA) is pleased to announce the topics for its 2008 Audio Conferences, which will take place on the following dates. During these one hour sessions, AOPA experts will provide the most up-to-date information on the following topics.

- ✓ March 19 Tips on Getting Paid
- ✓ April 23 Hints on Complying with Quality Standards
- ✓ May 21 Handling Difficult Patients
- ✓ June 18 Stark/Anti-Kickback Laws
- ✓ July 16 How to Market your Practice
- ✓ August 16 VA Issues
- ✓ September 17 How to Not Get Sued
- ✓ October 15 Fraud and Abuse
- ✓ November 19 New Codes for 2009

All calls will take place from 1:00 – 2:00 PM Eastern Time.

How to Register

Since multiple employees can participate from each of your company locations, the registration fee applies to each attending company per phone line. Complete only **one** registration form for each company location. To register by fax, complete the registration form, include your VISA or MasterCard information and fax to (571) 431-0899. To avoid duplicate charges, please do not mail your form after faxing it. To register by mail, complete the registration form and mail it with your payment by check, money order, or credit card to: AOPA Seminars, P.O. Box 34711, Alexandria, VA 22334-0711. *(Please note that mailed registrations may take longer to be received and processed.)* **Registrations will not be processed without payment.**

Acknowledgement letters confirming registration and telephone seminar instructions will be sent via e-mail to each registering company. Please read this confirmation letter carefully. If corrections or changes are needed, note them on the confirmation and return it by fax to (571) 431-0899 or reply to the e-mail with changes.

You must be registered to participate in the AOPA telephone seminar no later than **11:00 AM, Eastern Time** on the day of the seminar.

Registration Fee

The price for each telephone seminar for AOPA members is **\$99** and non-members pay **\$199** for each telephone seminar.

Cancellation Fee

To receive a refund of registration fees, notification of cancellation **must be received in writing, one week prior to the telephone seminars taking place. A processing fee of \$25 will apply to all cancellations.**

Payment

Registration forms must be accompanied by full payment in U.S. funds in order to be processed. VISA, MasterCard, checks, and money orders are the only accepted forms of payment. Checks should be made payable to AOPA and must be drawn on a U.S. bank.

Course Materials

Course materials will be delivered to the one e-mail address listed on your registration form. You will need these materials to fully participate in the telephone seminar.

Questions? E-mail Erin Kennedy at ekennedy@AOPAnet.org or call (571) 431-0876.



American Orthotic & Prosthetic Association (AOPA)

2008 Audio Conferences

Registration Form

Company

Contact Name

Street Address

City

State

Zip

Telephone Number

Fax Number

E-mail (required for confirmation)

Please choose (All conferences will be held from 1:00 – 2:00 PM Eastern Time)

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> March 19 | Tips on Getting Paid |
| <input type="checkbox"/> April 23 | Hints on Complying with Quality Standards |
| <input type="checkbox"/> May 21 | Handling Difficult Patients |
| <input type="checkbox"/> June 18 | Stark/Anti-Kickback Laws |
| <input type="checkbox"/> July 16 | How to Market your Practice |
| <input type="checkbox"/> August 16 | VA Issues |
| <input type="checkbox"/> September 17 | How to Not Get Sued |
| <input type="checkbox"/> October 15 | Fraud and Abuse |
| <input type="checkbox"/> November 19 | New Codes for 2009 |



Registration Fee

- Per course AOPA member \$99 per phone line
- Per course Non-member \$199 per phone line
- Entire Series AOPA member \$693 per phone line
- Entire Series Non-Member \$1,393

Payment Information

_____ Number of Seminars X _____ Rate = _____ **Total Payment Amount**

Payment Method Visa _____ MasterCard _____ Check _____

Credit Card Number

Exp. Date

Name on card (please print)

Signature

**Fax with Credit Card Information to: (571) 431-0899 or Mail Completed Form with Payment to:
AOPA Audio Conferences, P.O. Box 34711, Alexandria, VA 22334-0711**

How did you hear about the Audio Conferences? (Check all that apply)

- | | | |
|----------------------------|---|--------------------------------|
| ___ <i>O&P Almanac</i> | ___ <i>AOPA in Advance (AIA) Newsletter</i> | ___ <i>AOPA e-mail</i> |
| ___ <i>AOPA Fax</i> | ___ <i>AOPA Web site</i> | ___ <i>Through a Colleague</i> |