

REGISTRATION FORM
OPTICIANS ASSOCIATION OF MICHIGAN SPRING EDUCATIONAL
FRIDAY APRIL 12, 2019
CROWN PLAZA WEST
925 South Creyts Road, Lansing, MI 48917 - 517-323-7100

First Name _____ Last Name _____ Phone _____

Circle all that apply: First OAM Seminar OAM Member New Member ABOC NCLEC MBCO

E-Mail _____ Fax _____

Address _____ City _____ State ____ Zip _____
Home

Company _____ Office Phone _____

REGISTRATION PACKAGES

COMPLETE PACKAGE:

Includes classes - 101, 102, 103, 105, 108, 109 and 111

	OAM MEMBER RATE	\$0.00		
	Non Member Rate	190.00	\$	
<i>Additional Charge</i>	<i>Hands on Classes - 104, 106 and 110 each</i>	\$20.00	\$	
<i>Additional Charge</i>	<i>ABO Review Course - 107</i>	\$50.00	\$	

MICHIGAN BOARD CERTIFIED OPTICIAN TEST (MBCO):

<i>Held on Saturday</i>	OAM MEMBER RATE	\$129.00		
			\$	
New Membership to Opticians Association of Michigan		\$125.00		
Late Fee (after April 3rd, 2019)		\$25.00	\$	

101
102
103
104
105
106
107
108
109
110
111
MBCO

Please Circle
Your Choice
of Classes

TOTAL \$ _____

PAYMENT Visa M/C Discover AMEX

Card# _____ SVC _____ Exp Date _____

Cardholder's Name _____

Signature _____

Mail completed registration form and check payable to:
Opticians Association of Michigan, 1940 Theresa Avenue, DeWitt, MI 48820
www.theoam.org Phone: 877/297-1668 Fax: 517/515-7880
 Cancellations must be received by **April 7 2019** FOR FULL REFUND