



**Valvular Heart Disease 2007**  
Advanced Surgical and Interventional Therapies

**AATS POSTGRADUATE COURSE**  
*American Association for Thoracic Surgery*

**September 7-9, 2007**  
Sheraton Chicago Hotel & Towers, Chicago, IL



[www.aats.org](http://www.aats.org)

**PRE-REGISTRATION LABEL FORM**

The final pre-registration list is available on a one time, one use basis after August 16<sup>th</sup>. The cost is \$250. All labels will be sent 3 up pressure sensitive in zip code order. Payment and a copy of your mail piece must be included with order form and sent to:

AATS Valvular Heart Disease  
**Attn: Yvonne Grunebaum**  
 900 Cummings Center, Suite 221-U  
 Beverly, MA 01915 USA  
 Telephone: 978-927-8330  
 Fax: 978-524-0498

**Amount enclosed:** \$ \_\_\_\_\_

Please charge my  Amex  MC  Visa # \_\_\_\_\_ Exp \_\_\_\_\_

**Company Name:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**Email:** \_\_\_\_\_

I understand by ordering the labels, I will use them once and will not reproduce them. Please note that this list is seeded to detect unauthorized use and may be used for this mailing only. If unauthorized use is found, a \$1,000 fee will be imposed.

**Contact Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**NOTE:** If you would like the labels sent Federal Express include your account number below.

**Federal Express Account #:** \_\_\_\_\_

**Overnight**  **Second Day**