



**American Tamil Medical Association**  
 207 Benedict Road, Staten Island, NY, 10304-1270  
 A non-profit, 501(c)(3) organization  
 Tax Id: 20-2245175

**ATMA 14th Biennial Convention  
 & CME Conference - Aug9-11<sup>th</sup> 2019**  
**Bally's Resort, 1900 Boardwalk, Atlantic City, NJ, 08401**  
**Tel – (609) 340 - 2000**

<b>First Name</b>		<b>Last Name</b>			
<b>Address</b>					
<b>City</b>		<b>State</b>		<b>Zip</b>	
<b>Medical College/ University Attended</b>				<b>Year of Graduation</b>	
<b>Email</b>				<b>Years of Practice</b>	
<b>Hospital Affiliation</b>				<b>Phone</b>	
<b>Specialty/ Job Title</b>					
<b>Spouse's Name</b>					
<b>ATMA Member</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No			<b>Pending Membership</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No

## CME Registration/ Convention Fee Schedule

**Hotel Registration is mandatory for attending Convention.**

Separate Hotel Registration Form is Available.

	Registration Type	Amount	Number	Subtotal
<input type="checkbox"/>	ATMA Member + CME	\$450		
<input type="checkbox"/>	ATMA Member (Retired) + CME	\$350		
<input type="checkbox"/>	ATMA Member (Students/ Resident)	\$200		
<input type="checkbox"/>	Spouse/Guests	\$300		
<input type="checkbox"/>	Children (9 years and above)	\$150		
<input type="checkbox"/>	Children (8 years and below)	Free		
<b>Total Payment to ATMA</b>				

*The registration fee includes all programs, food, CME, and ATMA Journal. Please register for hotel separately.*

For payment through credit card please visit [www.atmausa.org](http://www.atmausa.org) and pay through PayPal.

To pay by check – make it payable to ATMA NY/NJ Chapter with the appropriate amount and mail to Dr. Saravanan Ramalingam at 121 Ridge Road, Rutherford, NJ – 07070

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



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## Hotel Registration Fee Schedule

**Hotel Registration is mandatory for attending Convention.**

	Thursday, August 8, 2019 (optional)		Friday, August 9, 2019		Saturday, August 10, 2019		Sunday, August 11, 2019 (optional)	
Room Type	Regular	Suite (3 Rooms)	Regular	Suite (3 Rooms)	Regular	Suite (3 Rooms)	Regular	Suite (3 Rooms)
Cost/Night	\$114	\$500	\$154	\$500	\$210	\$500	\$114	\$500
Number of Rooms								
Subtotal								
<b>Total Payment to ATMA</b>								

Guest	Name/ Age	Phone Number	Email
1			
2			
3			
4			
5			
6			
How Many Veg & Non-Veg			
Vegetarian		Non-Vegetarian	

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

For Further Information Please Contact:  
 Dr. Deeptha Nedunchezian (President) | Dr. Saravanan Ramalingam (Treasurer/ Convention Co-Chair)  
 Email: [atmausapresident@gmail.com](mailto:atmausapresident@gmail.com) | [dkrs191@gmail.com](mailto:dkrs191@gmail.com)  
 Phone: +1 (917) 331-6870 | +1 (315) 571-8191  
 Website: [www.atmausa.org](http://www.atmausa.org)