

**COAFP 15<sup>th</sup> Annual KSA: Care of Children  
Registration Form  
Saturday, April 22, 2023  
9:00 a.m. – 12:00 p.m.**

**Physician:** \_\_\_\_\_

**6-digit ABFM ID #:** \_\_\_\_\_

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

**Mailing Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Dietary Requirements:** \_\_\_\_\_

**Member Registration Fee \$55.00 \_\_\_\_\_ Non-Member Registration Fee \$80.00 \_\_\_\_\_**  
(Please make check payable to the COAFP. This fee covers meeting materials, breakfast, CME, and reporting.)

Consult your personal records to confirm you have not completed the Care of Children module within the last 3 years to obtain credit for this session.

**Important!** Bring your laptop, tablet, or mobile phone for Poll Everywhere participation. Wi-Fi and support provided.

To guarantee your seat and materials, please submit this registration form and payment by **Friday, April 14**, to:

COAFP  
c/o Hilary Eaton  
2345 Woodcreek Pl  
Powell, OH 43065

Cancellations must be received by **Friday, April 14**, for a refund.

If you have questions, please contact Hilary Eaton by emailing [centralohaftp@gmail.com](mailto:centralohaftp@gmail.com).