

# 2024 EyeCon: November 2<sup>nd</sup>-3<sup>rd</sup> - Registration Form

Downloadable forms and online registration are available online at [www.TOAEyeCon.com](http://www.TOAEyeCon.com).

*\*If you attend all specified vendor sessions on Saturday and Sunday,  
we will rebate \$200 of your registration fee.*

Please print the following information. ONE ATTENDEE per form.

Practice Information			
Practice Name:		Address:	
City/State/Zip:		Office Phone:	Office Fax:
Optometrist Information			
Last Name:	First Name:	Nickname/Badge Name:	Suffix:
License #:	Cell Phone #:	*Email:	

\*Email is required for registration verification. By giving TOA your information you will automatically be signed up to receive the TOA E-News and other optometry related information.

TOA/ AOA MEMBER PRICING	Before 5pm, Oct. 25	GENERAL INFORMATION
<b>Optometrist MEMBER</b> \$200 <input type="checkbox"/> <i>(DOES NOT Include Professional Responsibility Course)</i>		<b>Course Handouts:</b> Handouts will be available online at <a href="http://www.toaeyecon.com">www.toaeyecon.com</a> as they become available. NO PAPER COURSE HANDOUTS or WIFI FURNISHED ON-SITE.
<b>Optometrist MEMBER with Ethics Course (PRC)</b> \$300 <input type="checkbox"/> <i>INCLUDES Professional Responsibility Course - the \$100 Professional Responsibility fee included in this price is not eligible for rebate)</i>		<b>\$200 Rebate Information:</b> *If you attend specified vendor sessions on Saturday and Sunday, we will rebate \$200 of your registration fee.
<b>Optometrist MEMBER Ethics Course (PRC) ONLY</b> \$100 <input type="checkbox"/> Not eligible for rebate. <i>(Ethics ONLY INCLUDES Professional Responsibility Course)</i>		<b>Courses/Events:</b> Continental Breakfast and Boxed Lunch is included Saturday and Sunday with the Optometrist Full Registration.
NON-MEMBER PRICING	Before 5pm, Oct. 25	<b>Professional Responsibility Course ONLY Attendees:</b> Badge can be picked up Sunday after 2pm.
<b>Optometrist NON-MEMBER</b> \$300 <input type="checkbox"/> <i>(DOES NOT Include Professional Responsibility Course)</i>		<b>Continuing Education Hours:</b> There will be 16 hours of continuing education offered (includes annual Opioid Course requirement, Human Trafficking Course requirement and Ethics requirement).
<b>Optometrist NON-MEMBER with Ethics Course (PRC)</b> \$400 <input type="checkbox"/> <i>INCLUDES Professional Responsibility Course - the \$100 Professional Responsibility fee included in this price is not eligible for rebate)</i>		<b>Meeting Cancellation/Refund Policy:</b> FULL Refund if notified by October 10 <sup>th</sup> . Cancellations between Oct 11 <sup>th</sup> and Oct 25 <sup>th</sup> , a \$50 fee will be assessed. Cancellations after Oct 25 <sup>th</sup> are non-refundable.
<b>Optometrist NON-MEMBER Ethics Course (PRC) ONLY</b> \$100 <input type="checkbox"/> Not eligible for rebate. <i>(Ethics ONLY INCLUDES Professional Responsibility Course)</i>		<b>Hotel Information:</b> Westin Galleria Dallas 13340 Dallas Pkwy, Dallas, Texas 75240 Phone: (972) 934-9494 Room Rate: \$185 <i>(if booked by October 10<sup>th</sup>)</i> Book online at <a href="https://bit.ly/24westin">https://bit.ly/24westin</a>
<b>TOTAL Amount Due:</b> _____		<b>Send your completed form and payment by mail or fax:</b>
PAYMENT		<b>Mail to:</b> Texas Optometric Association, Inc. P.O. Box 654320, Dallas, TX 75265-4320
<input type="checkbox"/> <b>Check</b> My check for \$ _____ is enclosed. (payable to "TOA")		<b>Fax to:</b> (512) 326-8504
<input type="checkbox"/> <b>Credit Card</b> Charge my credit card \$ _____		
Card Number: _____		
Exp. Date: _____ Security Code: _____		
<input type="checkbox"/> Approval to charge credit card:		
Signature: _____		

**REGISTER ONLINE: <https://toaeyecon.com>**

For questions or more information, email [events@txeyedoctors.com](mailto:events@txeyedoctors.com) or call (512) 707-2020.