

**Register Now for the 91st
Annual Educational Conference
SEARCHING FOR THE TRUTH:
MEDICINE, MORALITY & THE MEDIA**



The 2022 Annual Educational Conference will be held September 8-10, 2022, at the Sheraton Downtown Denver Hotel in Denver, Colorado and will highlight the intersection of medical practice, bioethics and morality and the pervasive effect of media and means of social communication. Catholic clinicians are always in the search of the truth in both the science of medicine and its application as enlightened by Christian faith. Medicine needs to be applied with the best evidence for safety and efficacy yet guided by Catholic moral principles that secure the protection of human dignity.



The conference will bring together clinicians, clergy and media experts to explore the great opportunities offered by the interplay of bioethics in the Catholic tradition and social media. Recognizing the intellectual and spiritual dangers involving media, the 2022 CMA Annual Education Conference seeks to allow the Light of Christ to reveal what is true, good, and just apart from the movements of malice and wickedness in our current age.

Under the patronage of St. Paul, who no doubt would use every form of media to spread the Gospel, the conference will leave participants with a new appreciation of the beauty of their faith and their call to share it with all they encounter.

FULL CONFERENCE PACKAGE

Includes Registration on Thursday, Friday and Saturday, Breakfasts, Lunches, the Saturday Evening Banquet and access to all talks.

CMA MEMBERS INCLUDING CME CREDIT

By June 30	\$860	\$ _____
After July 1	\$940	\$ _____

CMA MEMBERS WITHOUT CME CREDIT

By June 30	\$675	\$ _____
After July 1	\$755	\$ _____

NON-CMA MEMBERS INCLUDING CME CREDIT

By June 30	\$975	\$ _____
After July 1	\$999	\$ _____

NON-CMA MEMBERS WITHOUT CME CREDIT

By June 30	\$755	\$ _____
After July 1	\$845	\$ _____

Limited scholarships are available for medical students and residents. Contact the CMA for more information.

SINGLE-DAY REGISTRATION

Includes everything for a single day (except Special Event and Banquet)

Circle Day(s): **Thursday** **Friday** **Saturday**

MEMBERS & NON-MEMBERS INCLUDING CME CREDIT

By June 30	\$325	\$ _____
After July 1	\$390	\$ _____

MEMBERS & NON-MEMBERS WITHOUT CME CREDIT

By June 30	\$250	\$ _____
After July 1	\$315	\$ _____

SATURDAY EVENING BANQUET

Included in the Full Conference Package

Additional Tickets: Adults	\$130	\$ _____
Children (10 years and under)	\$30	\$ _____

VIRTUAL CONFERENCE

INCLUDING CME CREDIT

By June 30	\$550	\$ _____
After July 1	\$600	\$ _____

WITHOUT CME CREDIT

By June 30	\$450	\$ _____
After July 1	\$500	\$ _____

SPECIAL EVENTS

Not included in the Full Conference Package. Event attendance is limited.

Wednesday Pre-Conference (Please Choose One)

End of Life Forum 12:30 pm - 3:00 pm	\$50	\$ _____
Natural Family Planning Forum 3:00 pm - 5:30 pm	\$50	\$ _____

Thursday Evening Special Event

Mount Vernon Canyon Club with Chris Collins Band,
A Tribute to John Denver
Includes transportation, dinner, soft drinks and concert.

6:30 pm - 9:30 pm		
Adults	\$150	\$ _____
Children (ages 10 and under)	\$50	\$ _____

TOTAL AMOUNT \$ _____

To ensure your place, please return this Registration Form and the correct fee no later than August 15, 2022

Name: _____
PLEASE PRINT

Email: _____

Registrant's Degree: _____

Address: _____

City: _____ State: _____ Zip: _____

Ph: (____) _____ Cell: (____) _____

Is this your first CMA Educational Conference? Yes No

Special Dietary Needs: _____

List names of ALL Attending and specify event for each person:

DONATION OPPORTUNITIES

I would like to make a tax-deductible donation to the Medical Student and Resident Education Fund \$ _____

I would like to support the conference with a tax-deductible donation \$ _____

Registration may be submitted via mail, fax or via the CMA Online Conference Registration Page: cathmed.org/events

Please make checks payable to Catholic Medical Association. Mail (or fax: 866-714-0242) the completed form to:

CATHOLIC MEDICAL ASSOCIATION
550 PINETOWN RD, SUITE 205
FT. WASHINGTON, PA 19034

AmEx Discover MasterCard Visa

Cardholder Name: _____

Card Number: _____ CVV# _____

Expiration Date: ____/____ Amount Authorized: \$ _____

Billing Address: _____

Cardholder Signature: _____

REFUND POLICY: A refund will be given if notification is received in writing on or before August 15, 2022; minus a \$75 administrative fee. No refunds AFTER August 15, 2022.