



35th Annual Emerald Coast Conference July 23-27, 2025

Hotel Reservations: (850) 267-9500

ALOMA's Room Rate: \$434-474 depending on view

Reservations must be made by 6/30/25 to guarantee room rate.

Available rooms will go quickly! Make your reservation today!

25 Category 1 AOA Credits

Nickname: _____ Credentials (ex: DO, RN, OMS-II) _____

Full Name: _____

Street Address: _____

City/State/Zip: _____

Phone: _____ Cell: _____

Fax: _____ Email: _____

Medical School: _____

Grad Year: _____ AOA #: _____

	By: 6/20/25	After: 6/20/25
<input type="checkbox"/> ALOMA Members, NP, PA, PharmD, RT, RN, LPN	\$525	\$575
<input type="checkbox"/> Non-Member	\$675	\$725
<input type="checkbox"/> Student/Resident	\$0	\$0
<input type="checkbox"/> Retired Physician Date Retired: _____	\$425	\$450
<input type="checkbox"/> Active Military	\$425	\$450
Total Payment Due:		

To attend at member rate, contact ALOMA for a membership application.

Acceptable forms of payment: Check or credit card. Check #: _____ Date: _____

Credit Card: MC Visa Discover American Express

Card Number: _____ Expiration Date: _____

Name On Card: _____ Security Code: _____

Billing Address: _____

Cancellations: If received in writing by June 20, 2025, we will be happy to refund your registration less a \$50 administrative fee.

Complete and return this form with payment to:
Alabama Osteopathic Medical Association
PO Box 450 Piedmont, AL 36272

Email: kelly@aloma.org website: www.aloma.org
Phone: (334) 442-4015 Fax: (334) 442-4096 (credit card registrations only)