



2022 Webinar Group Registration Form

Name (First Enrollee): _____ **Phone:** _____
Last First Middle

(The first enrollee must be registered for the webinar at full price.)

Home Address: _____ **Cell:** _____

Email Address: _____ **ASET ID#** _____

Institution: _____

**Group attendees will have full access to the live webinar, the recording and the quiz. Group attendees must complete this form and submit payment to register. CEU credit will only be granted after passing the required quiz following each webinar.*

Webinar Quiz Only Course Enrollment	# of members	member	# of non-members	Non-member
<input type="checkbox"/> Jan. 19 - The Role of the EEG Specialist		@ \$10.00		@ \$15.00
<input type="checkbox"/> Feb. 16 - Evoked Potentials and Cranial Nerves		@ \$10.00		@ \$15.00
<input type="checkbox"/> Mar. 16 - Traumatic Brain Injury and Seizures		@ \$10.00		@ \$15.00
<input type="checkbox"/> Apr. 20 - 2022 CPT Coding & Billing Updates		@ \$10.00		@ \$15.00
<input type="checkbox"/> May 18 - Wada Testing		@ \$10.00		@ \$15.00
<input type="checkbox"/> Sept. 21 - Facilitating TCeMEP Recordings During Pediatric Spinal Surgery		@ \$10.00		@ \$15.00
<input type="checkbox"/> Oct. 19 - IONM for Endoscopic Endonasal Approach (EEA) Skull Base Surgery		@ \$10.00		@ \$15.00
<input type="checkbox"/> Nov. 16 - Extended Webinar/Fall Virtual Meeting Topics TBA		@ \$TBA		@ \$TBA
<i>*Use the space below to enroll in other previously recorded webinars by listing the title, item number & price.</i>				
TOTAL due =				

Staff Information			
Name	email	Address	ASET ID

This form can be duplicated to add staff attendees.

Payment Method:

- Check or Money Order payable to ASET – The Neurodiagnostic Society [payment must be in US dollars drawn on a US bank]
- American Express Discover MasterCard Visa

Name on Card: _____

Account No: _____

Expiration Date: _____ Billing Zip Code: _____ CID: _____
Month / Year

Cardholder Signature: _____

Return form with payment to Olivia@ASET.org

ASET – The Neurodiagnostic Society

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