

2027 ANNUAL MEETING

South Carolina Rheumatism Society

April 16-18, 2027



By Registering for this conference, you acknowledge and agree to the cancellation policy stated below.

Name _____ Personal ID# XXX-XX- _____
(As you would like it printed on your name badge) (Last four digits of your SSN)

Address _____

City _____ State _____ Zip _____

Specialty _____ Degree/Credentials _____

Email _____
(Please provide your active email address to ensure proper receipt of all CME Credit documentation.)

Phone (_____) _____ - _____ Fax (_____) _____ - _____

PLEASE READ THE STATEMENTS BELOW AND CHECK THE BOX IF YOU AGREE.

- ☐ YES I give permission to the MUSC Office of CME to share my name, city, and state with other attendees and the companies that will be exhibiting at and/or supporting the conference through educational grants..
- ☐ NO I **do not** give permission to the MUSC Office of CME to share my name, city, and state with other attendees and the companies that will be exhibiting at and/or supporting the conference through educational grants..

REGISTRATION

All Medical Care Professionals
Industry Professionals

UNTIL 2/28/2027

- ☐ \$200
☐ \$300

AFTER 2/28/2027

- ☐ \$250
☐ \$350

SYLLABUS

In our efforts to “go green”, an online syllabus will be provided to all attendees. Information will be emailed to you prior to the conference so that you may download a copy. Internet connection will also be available in the meeting room.

CONFERENCE REGISTRATION MAY BE CHARGED TO:

- ☐ Enclosed Check Payable to Medical University of South Carolina
☐ MasterCard ☐ Visa ☐ Discover ☐ American Express

Card Number _____ Expiration Date _____

Name as it appears on card _____ CVV Security Code _____

REGISTRATION METHODS

(Please use ONE of these methods to register. Do not mail if previously faxed or telephoned).

- Mail registration form with check made out to “Medical University of South Carolina” or credit card information to
Office of CME
Medical University of South Carolina
96 Jonathan Lucas Street
HE601, MSC 754
Charleston, SC, 29425
- Email/Scan completed registration form to cmeoffice@musc.edu
- Complete registration through the QR Code to the right



[Register Online!](https://www.musc.edu/cme)
www.musc.edu/cme

CANCELLATIONS

A refund will be made upon written request prior to March 15, 2027 less a \$100 cancellation fee. After March 15, 2027, no refunds will be made. We reserve the right to cancel the program if necessary. Full registration fees will be refunded for canceled programs. By registering for this conference, you acknowledge and agree to this cancellation policy.