



MAHEC PRIMARY CARE SPORTS MEDICINE FELLOWSHIP PRESENTS

Asheville Sports Medicine Spring Summit: *Preventing and Treating Running Injuries*

JOIN US MAY 2-3, 2019

OPTIONAL DINNER & DRINKS

| | |
|---------------------|--|
| LOCATION | Cambria Hotel Downtown Asheville 15 Page Avenue, Asheville, NC 28801 |
| DAY 1 DINNER | Thursday, May 2, 2019 6:00 pm–9:00 pm (<i>dinner provided</i>) |

CONTINUING EDUCATION EVENT

| | |
|-----------------------------------|---|
| LOCATION | MAHEC Simulation Center Mary C. Nesbitt Biltmore Campus 119 Hendersonville Rd, Asheville, NC 28803 |
| DAY 2 REGISTRATION PROGRAM | Friday, May 3, 2019 7:30 am–7:45 am (<i>refreshments provided</i>) 7:45 am–3:45 pm (<i>lunch provided</i>) |

REGISTRATION DETAILS

The registration fee for this program is \$50.00 for Faculty, Fellows, and Residents or \$25.00 for Athletic Trainers and Physical Therapists. This fee includes administrative costs, educational materials, refreshments, lunch, and an optional dinner on May 2, 2019.

MAHEC has a pay-up-front policy for all CE programs. The only exceptions will be for pre-approved programs where an individual payment plan is appropriate. Registrations received without an accompanying payment will not be processed and participants who have not paid the course fee will not be admitted into the program.

Unless otherwise noted in course materials, the following cancellation policy applies to all programs:

- Cancellations must be in writing (via fax, email, or mail)
- Cancellations received more than 2 weeks prior to the event will receive 100% refund
- Cancellations received between two weeks and two full business days prior to the first day of the event are refunded at 70% of the registration fee subject to a minimum \$25 cancellation fee
- No refunds or credits will be given for cancellations received less than two full business days prior to the event
- No vouchers will be issued in lieu of a refund
- Transfers/substitute(s) are welcome (please notify us in advance of the program)

DAY 1 LOCATION

Cambria Hotel Downtown Asheville
15 Page Avenue, Asheville, NC 28801

[CLICK FOR DIRECTIONS](#)

DAY 2 LOCATION

MAHEC Simulation Center
Mary C. Nesbitt Biltmore Campus
119 Hendersonville Road, Asheville, NC 28803

From I-40 E: Take Exit 50; turn left on Hendersonville Rd.
From I-40 W: Take Exit 50B; merge on Hendersonville Rd.

At the first light, turn left into the DoubleTree Hotel complex. Turn left (away from the hotel). You will see a steep driveway on your right. Turn right and go up that driveway to the MAHEC Biltmore Campus.

From 19-23 (I-26): Take 240 East to Exit 5B (Charlotte Street). Exit right onto Charlotte Street. At the 4th light, make a left onto Biltmore Avenue. Proceed through 8 traffic lights. At the 9th light, turn right into the DoubleTree Hotel complex. Turn left (away from the hotel). You will see a steep driveway on your right. Turn right and go up that driveway to the MAHEC Biltmore Campus.

ACCOMMODATIONS

Cambria Hotel Downtown Asheville
15 Page Avenue, Asheville, NC 28801

[CLICK TO RESERVE](#)

A limited number of rooms have been reserved for the night of May 2, 2019. The special discounted rate for a 1-night stay is \$119.00 plus tax. The room block will expire on **April 11, 2019** or until it is sold out. You may call the hotel directly at 828-255-0888 for reservations. Please ask for the "Asheville Sports Medicine Spring Summit" rate when inquiring.

HAVE A QUESTION?

Contact the Program Planner

Elaine Alexander, RN, MSN, RNC-OB

elaine.alexander@mahec.net or 828-257-4414



Special Services

828-257-4485

REGISTRATION INFORMATION

FAX REGISTRATION

828-257-4475

ONLINE REGISTRATION

828-257-4768

EMAIL

www.mahec.net

MAIL

registration@mahec.net

MAHEC Registration

121 Hendersonville Road, Asheville, NC 28803

REGISTRATION FORM

CLICK HERE
TO REGISTER

☐ Updated contact information.

NAME _____

CREDENTIALS _____

SOCIAL SECURITY # XXX-XX-____ (last 4 digits required)

OCCUPATION _____

EMAIL ADDRESS _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME COUNTY _____

HOME # _____ WORK # _____

EMPLOYER _____

DEPARTMENT _____

EMPLOYER'S ADDRESS _____

CITY _____ STATE _____ ZIP _____

WORK COUNTY _____

Program announcements will be sent to your email unless you opt out from receiving MAHEC emails. We never share our mailing lists.

☐ Please remove my name from the MAHEC mailing list.

MEAL PREFERENCE ☐ Vegetarian ☐ Gluten-free ☐ Vegan

FACULTY, FELLOWS, & RESIDENTS ☐ \$50.00 per person

ATHLETIC TRAINERS &
PHYSICAL THERAPISTS ☐ \$25.00 per person

Full payment must accompany all submitted registrations unless a payment plan has been approved in advance. Registrations received without accompanying payment will not be processed.

☐ Check is enclosed ☐ Credit card information provided

☐ Visa ☐ MasterCard ☐ Discover Card ☐ American Express

ACCOUNT # _____

EXP ____ / ____ CODE ON BACK OF CARD _____ (3 digits)

NAME ON CARD _____

SIGNATURE _____



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CONCURRENT BREAKOUT SESSION SELECTION

Friday, 9:00 am–9:55 am (please choose one)

- ☐ A. Orthotics in Running: Fabrication Demo Lab (no credit)
☐ B. Diagnostic Ultrasound Lab of Foot/Ankle/Knee

Friday, 10:00 am–11:00 am (please choose one)

- ☐ C. Orthotics in Running: Fabrication Demo Lab (no credit)
☐ D. Diagnostic Ultrasound Lab of Foot/Ankle/Knee

Friday, 11:10 am–11:40 am (please choose one)

- ☐ E. Recovery Techniques for Distance Runners
☐ F. Running Efficiency: Baseline Needs to Run Without Pain
☐ G. Dry Needling for Runners

Friday, 11:45 am–12:15 pm (please choose one)

- ☐ H. Recovery Techniques for Distance Runners
☐ I. Running Efficiency: Baseline Needs to Run Without Pain
☐ J. Dry Needling for Runners

Friday, 12:20 pm–12:50 pm (please choose one)

- ☐ K. Recovery Techniques for Distance Runners
☐ L. Running Efficiency: Baseline Needs to Run Without Pain
☐ M. Dry Needling for Runners

Please note that CME credit will not be awarded for sessions A and C.

DINNER AT THE CAMBRIA HOTEL DOWNTOWN ASHEVILLE

- ☐ Yes, I will be attending dinner on Thursday, May 2, 2019
☐ No, I will only be attending the CE event on Friday, May 2, 2019

Please note that CME credit will not be awarded for attending dinner.

CUSTOM ORTHOTICS BY GLENN CUMBERLAND

- ☐ For a fee, I would like to have a pair of custom orthotics made (at cost and payable outside of the educational event)
☐ I am not interested in a pair of custom orthotics

Send completed registration form to: #19IDSIM045/58888
MAHEC Registration
121 Hendersonville Road, Asheville, NC 28803 Fax: 828-257-4768



JOINTLY PROVIDED BY

The Department of Continuing Professional Development
and MAHEC Primary Care Sports Medicine Fellowship