

Register Online: [SanDiegoHeartFailure.com](http://SanDiegoHeartFailure.com)  
**REGISTRATION**

**25TH SD HEART FAILURE SYMPOSIUM  
JANUARY 17 & 18, 2025**

A HYBRID EVENT FROM THE

**HILTON LA JOLLA TORREY PINES LA JOLLA, CALIFORNIA**

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First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Title \_\_\_\_\_

Office Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Professional Specialty \_\_\_\_\_

Special Needs for Disabled \_\_\_\_\_

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**Registration Fees:**

\$225 Early Bird Physician Registration – on or before December 17, 2024

\$300 Physician Registration – December 18, 2024 or after and on-site

\$149 Early Bird Nurse Registration – on or before December 17, 2024

\$199 Nurse Registration – December 18, 2024 or after and on-site

\$50 Student Registration

*\*Student/Fellow with letter of verification*

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**CREDIT CARD PAYMENT** - Visa, Mastercard, Discover or Am Ex ONLY

Name of Registrant \_\_\_\_\_

Card Number \_\_\_\_\_

Security Code \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name on Card \_\_\_\_\_

Billing Address \_\_\_\_\_

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Amount \$ \_\_\_\_\_

Signature \_\_\_\_\_

**CHECK OR MONEY ORDER PAYMENT (in US dollars)**

*Make payable to:*

San Diego Heart Failure Symposium

*Send or Fax to:*

Complete Conference Management

3320 Third Avenue, Suite C

San Diego, CA 92103

Fax: 619-299-6675