



MYSTIC MARRIOTT HOTEL & SPA / REGISTRATION FORM – September 20-23, 2018

The staff and management of Mystic Marriott Hotel & Spa in Groton, CT look forward to your stay. To be assured of accommodations, please contact Mystic Marriot Hotel, Reservations Toll Free 877-901-6632 between 9:00 am – 8:00 pm Eastern Time Monday-Friday, or access booking website at https://book.passkey.com/go/NESA2018MysticMarriott by August 23, 2018. Be sure to reference the New England Society of Anesthesiologists (NESA) to receive the group rate. Accommodations will be assigned on a first-come, first-serve basis. Your special group rate of \$179 (Run of House) will not be offered after this cut-off date (state tax not included in this price-currently 15% per room per night). Accommodations are at a premium, reserve early! Individual guest reservations must be guaranteed by a major credit card. Individuals are required to cancel reservations at least 48 hours prior to arrival to avoid a charge including one night's room rate plus tax. Cancel by calling the hotel directly at 860-446-2600 or by calling Marriott Reservations at 1-866-449-7390. Check-in time is 4:00 PM. Check-out time is 11:00 AM.

We have planned a reception/buffet dinner for Thursday and reception/banquet dinner on Saturday evening. Friday night dinner you will be on your own. Please plan your Friday evening so you will be back in time to take part in the Cracker Barrel Session, starting at 8:30 pm. The Cracker Barrel session is part of the CME program.

The Offshore Clam Boil Buffet Dinner will be on Thursday evening at \$84.34 per person (this price includes tax and gratuity) Dr. Linda Mason, President-elect of the ASA will present the "ASA Update" on Thursday evening via Zoom technology. The NESA Annual Meeting will be held after dinner on Thursday evening at 9:15 PM in Mystic Salon C.

New this year as part of the program on Saturday afternoon is the Interactive Interscalene Brachial Plexus & Fascial Plane Workshop using virtual cadaver. There will be a luncheon for the workshop registrants.

Saturday's Banquet Dinner will be a combo with Filet Mignon and Seared Swordfish for \$77.85 per person, these prices include all taxes and gratuities. Please reserve your evening meals and pay with your meeting registration, note if you have any food allergies.

Coffee, tea, juice will be available during the meeting in the Exhibit Hall for registrants and exhibitors.

NESA Annual Golf Tournament at Shennecossett Golf Course – Friday afternoon-don't forget to bring your clubs! Sign up below.

NESA 5K Fun Run – will take place on Saturday at 6:15 AM (if enough interest). Bring your gear!

Be sure to go to Mystic Marriott Website www.mysticmarriott.com - new SPA on site – call ahead to make your appointments.

For Mystic Attractions and discount tickets, go to https://mystic.org/.

(tear here and return the bottom form to NESA to register for the meeting and to reserve your meals for Thursday and Saturday)

Meeting Registration: Mail this form to: NESA, Inc., 61st Annual Fall Conference, PO Box 904, South Carver, MA 02366 Questions? Call 508-866-1144, or Email: NESABOX1@verizon.net

(Please Print)

Person Attending Conference: _____ Hospital Affiliation: _____

Name of guest (s) _____

Street Address: _____ City/State/Zip: _____

Email Address: _____ Phone: _____

Staying at Resort? ___ Yes ___ No ABA Number: _____

Interested in playing in the Golf Tournament on Friday at the Shennecossett Golf Course? _____

How many: _____ Potential partner(s) _____

Tournament Fee: \$35.00 Shennecossett Golf Course Fee \$58 [includes cart] will be charged to your room

Reserve here for your Dinner – Thursday and/or Saturday

Thursday Offshore Clam Boil Buffet _____ number \$84.34 per person (all taxes/gratuities included in price)
Saturday Banquet Dinner (Filet Mignon/Swordfish) _____ number \$77.85 per person (all taxes/gratuities included in price)

NESA member? ___ Yes ___ No Interested in Membership? ___ Yes ___ No Yearly dues \$50

(If not a NESA member, join now and save on your registration fee this year)

• See brochure to compute correct amount for meeting registration fee

Check enclosed: \$ _____ or, Credit Card No. _____

Credit Card Amount: \$ _____ MC ___ VISA ___ Exp. Date: _____ (date must be later than Nov. 1, 2018)

Meeting Amount _____ Membership _____ Golf Tournament _____

Thurs, NE Clam Boil Buffet Dinner(s) _____ Sat. Banquet Dinner(s) _____

Signature: _____ Date: _____

Office Use:

CC Confirmation Number _____ Amount _____

Check Number _____ Amount _____