



LOUISIANA ORTHOPAEDIC ASSOCIATION

2027 ANNUAL MEETING

April 15-17, 2027 | Hilton New Orleans Riverside | New Orleans, LA

REGISTRATION FORM

Last Name: First Name: Middle Initial:

Professional Degree: (such as MD, DO, PA, RN, NP, PT): Subspecialty:

Name of Practice:

Mailing Address:

City: State: Zip Code:

Office Phone: Home Phone: Cell Phone:

Email*:

**Email address is required to receive registration confirmation letter. Please print clearly for successful delivery.*

REGISTRATION FEES

Please check appropriate category below note that Early Bird (EB) pricing is only valid until 12/31/26:

- | | |
|--|---|
| ☐ LOA Member - \$300 (EB) / \$350 | ☐ Non-Member PA, NP - \$250 (EB) / \$275 |
| ☐ Emeritus/ Retired - No Cost (EB) / \$50 | ☐ Resident or Fellow - \$25 (EB) / \$50 |
| ☐ Physician Non-Member - \$400 (EB) / \$500 | ☐ Medical Student - No Cost (EB) / \$25 |
| ☐ Member PA, NP - \$150 (EB) / \$175 | |

By submitting this registration, I affirm that I have read and agree to the following terms:

- **CROWD RELEASE:** By registering and attending a Louisiana Orthopaedic Association (LOA) event/meeting, you grant LOA full rights in perpetuity to use the images resulting from the photography/video filming taken at the event/meeting, and any reproductions or adaptations of the images for publicity or other purposes to help achieve LOA's mission. This might include (but is not limited to) the right to use them in LOA's printed publications and in online publicity, social media, and live streaming.

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