

**CME REGISTRATION FORM**  
**29th Annual Primary Update – Summer Conference**  
**Wisconsin Dells, WI**  
**July 24 – 26, 2026**

**4 Easy Ways to Register**

1. Online (Fast & Secure) <http://CMEconference.org>
2. Fax: Complete Registration Form and fax to 1-800-764-8147
3. Phone: Call CMEI at 952-948-1685
4. Mail: Complete registration form and mail to CMEI  
1161 Wayzata Blvd E #229 Wayzata, MN 55391

**Participant Information**

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Print Name & Title (as you want them on your CME certificate)

E-Mail Address:

Home Address \_\_\_\_\_ City \_\_\_\_\_

State/Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Specialty \_\_\_\_\_ Title (MD/DO/NP/PA/Other) \_\_\_\_\_

**Payment Information**

\_\_\_\_\_ \$725.00 – Physicians

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\_\_\_\_\_ \$650.00 - Residents, Nurse Practitioners, Physician Assistants & Other Health Care Providers

**Registration Fee includes:** Continental Breakfast (Friday, Saturday & Sunday)

**Payment**

American Express  Visa  Master Card

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

Expiration Date (Mo /Yr) \_\_\_\_\_ Security Code: \_\_\_\_\_  
3 or 4 numbers

Bill Address (If different from above) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Check (Make Payable to Continuing Medical Education Institute and mail to:  
1161 Wayzata Blvd E #229 Way