

Enjoy the same speakers, sessions, and topics featured at one of our select live CME events at your own convenience, available On-demand. All On-demand CME programs allow up to one year to two years to complete from the date of release, please reference package expiration dates.

## These packages include:

-  Language - English
-  Certificate of Completion
-  Access On Desktop, Tablet & Mobile



## Registration Options

### Packages

- On-demand: Best of 2024 - \$687**  
 12 Speakers, 24 Video Courses  
 33.75 CME Credits (Rx=8.75)  
*Expires August 31, 2026*
- On-demand: Best of 2023 - \$687**  
 6 Speakers, 31 Video Courses  
 39 CME Credits (Rx=13.5)  
*Expires August 1, 2025*
- On-demand: Best of 2022 - \$497**  
 12 Speakers, 15 Video Courses  
 19.25 CME Credits (Rx=5.75)  
*Expires December 27, 2024*

### Courses By Topic

#### Cardiology & Emergency Medicine

- Package 1: 19 CME Credits (Rx=2.25) - **\$397**  
*Expires August 31, 2026*

#### Dermatology

- Package 1: 18 CME Credits (Rx=5.0) - **\$397**  
*Expires August 31, 2026*

#### Orthopedics

- Package 1: 12.5 CME Credits (Rx=0.75) - **\$297**  
*Expires August 31, 2026*

#### Women's Health

- Package 1: 12.75 CME Credits (Rx=1.75) - **\$297**  
*Expires August 31, 2026*

#### Diabetes

- Package 1: 5.5 CME Credits (Rx=2.00) - **\$147**  
*Expires October 1, 2026*

#### Pain Management, Pharmacology & Prescribing

- Package 1: 6.75 CME Credits (Rx=1.25) - **\$147**  
*Expires August 31, 2026*
- Package 2: 6.5 CME Credits (Rx=1.25) - **\$147**  
*Expires November 30, 2024*

**Total:** \_\_\_\_\_

## Account Information

\*Required Field

Email\*

Your email will be used to create your CME NOW account. Instructions will be sent for setting your password and accessing your account. By registering for this event, you are opting in to our mailing list. Please use the email address in which you wish to receive conference materials. You may unsubscribe at any time.

## Customer Information

<hr/> <b>First Name*</b>	<hr/> <b>Last Name*</b>	<hr/> <b>Suffix (ex. Jr., Sr.)</b>		
<hr/> <b>Credentials (i.e. PA-C, FNP, etc.)*</b>	<hr/> <b>Specialty*</b>	<hr/> <b>NPI*</b>		
<hr/> <b>Street Address*</b>	<hr/> <b>City*</b>	<hr/> <b>State/Province/Region*</b>	<hr/> <b>ZIP/Postal Code*</b>	<hr/> <b>Country*</b>
<hr/> <b>Home Phone Number*</b>	<hr/> <b>Work Phone Number</b>	<hr/> <b>Cell Phone Number</b>		

Include your cell number to receive periodic conference updates including conference material updates, certificate information, and more. Providing your cell phone number gives permission for Skin, Bones, Hearts & Private Parts to send periodic text messages. (4/mo.) Msg and data rates may apply. Reply STOP to unsubscribe.

## SPIRIT Program Information

Are you NEW to our programs and have you been referred by a SPIRIT member? Enter their information here. All SPIRIT information must be completed at time of registration for eligibility. SPIRIT Rewards only apply for Best Of packages. [See SPIRIT program details.](#)

<hr/> <b>SPIRIT Member First Name</b>	<hr/> <b>SPIRIT Member Last Name</b>	<hr/> <b>SPIRIT Member Code</b>
---------------------------------------	--------------------------------------	---------------------------------

## Billing Information

Billing Information is the same as Customer Information

<hr/> <b>Street Address*</b>	<hr/> <b>City*</b>	<hr/> <b>State/Province/Region*</b>	<hr/> <b>ZIP/Postal Code*</b>	<hr/> <b>Country*</b>
------------------------------	--------------------	-------------------------------------	-------------------------------	-----------------------

## Payment Information



<hr/> <b>Credit Card Number*</b>	<hr/> <b>Cardholder Name*</b>	
<hr/> <b>Expiration Date (MM/YYYY)*</b>	<hr/> <b>Security Code*</b>	<hr/> <b>Billing ZIP Code*</b>

### Payment:

Payment is due with the registration form. Please complete and mail to Skin, Bones, Hearts & Private Parts.

### Refunds:

No refund, transfer or cancellation after this transaction is complete.

### Mail or Fax Instructions:

If paying by credit card, please be sure to include all credit card information, including credit card number and billing zip code. Payment is due with registration form and must be postmarked/submitted by the above dates to qualify for corresponding rate. To avoid duplicate charges, do not mail original registration form if you have already faxed it or submitted it via webform.

#### Complete form and mail to:

Skin, Bones, Hearts & Private Parts  
1905 Woodstock Road, Suite 2150  
Roswell, GA 30075

#### Complete form and fax or email to:

770-640-1095 or Hello@SkinBonesCME.com

#### Make checks payable to DMGCME:

DMG's Federal Tax ID#: 58-2582200  
DUNS: 084319503  
Cage Code: 6PHS9  
Unique Entity ID: LTPPUXDVJED5