

Texas Cosmetic Surgery Society 2016 Annual Meeting

_____ I have enclosed my TCSS 2016 membership of \$100.

_____ I will attend the 2016 TCSS annual meeting and have enclosed the \$100 meeting registration fee.

_____ I will not attend.

NOTE: The TOC Eye and Face Conference fee is separate.

To attend the meeting your membership dues must be paid for 2016.

Name:

Address:

Telephone:

E-mail:

Please mail this form and check (payable to the Texas Cosmetic Surgery Society) to:

Wilbur Hah, M.D.

c/o Krystal Hammer

TCSS

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