

Registration

2026 Wound Care Seminar AND/OR OHFAMA Annual Business Meeting:

This seminar has been approved for **6 CME Category I Hours** and registrants may attend the seminar, the annual business meeting or both. Please register accordingly below.

Location • Embassy Suites Columbus – Airport, 2886 Airport Dr, Columbus, OH 43219

Wound Care Seminar - November 14, 2026 • 7:00 AM – 2:00 PM

OHFAMA Annual Business Meeting - November 14, 2026 • 2:30 PM – 5:00 PM

Full Name:_____ Preferred First Name:_____

Company/Clinic Name_____

Address:_____

City:_____ State:_____ Zip:_____

Business Phone: _____ Fax #:_____

E-Mail:_____ Website:_____

2026 OFAMF Wound Care Seminar – Please Mark One (add \$25 late fee after November 9, 2026):

- | | |
|---|--|
| ☐ OHFAMA/WVPMA Member - \$100 | ☐ Non- Member - \$200 |
| ☐ APMA Member Out of State - \$125 | ☐ Student/Resident/Life Member - \$35 |
| ☐ Non-Podiatrist - Assistant/Staff - \$75 | ☐ Not attending the Wound Care Seminar |

2026 OHFAMA Annual Business Meeting – Please Mark One (no registration fee):

- ☐ **Yes, I am attending the Annual Business Meeting**
- ☐ **No, I am NOT attending the Annual Business Meeting**

☐ Check payable to Ohio Foot and Ankle Medical Foundation (OFAMF)

☐ American Express ☐ Discover Card ☐ MasterCard ☐ VISA

Amount Authorized: \$_____

Account Number:_____

Expiration Date:_____ Security Code:_____

Name as printed on Credit Card:_____

Billing Address of Credit Card:_____

Signature:_____ Date:_____

Please email, mail or fax form with payment to:

OFAMF, 1960 Bethel Rd Ste 140, Columbus, OH 43220

Phone: (614) 457-6269, Fax: (614) 457-3375 or email: lridolfo@ohfama.org