

REGISTRATION FORM

2025 STFM Annual Spring Conference

May 3-7, 2025

Grand America and Little America Hotels, Salt Lake City, UT

INFORMATION

Name: _____ Degree(s): _____

Institution: _____

Address: _____

City, State, Zip: _____

Phone (cell/home/work): _____ Fax: _____

Email: _____

Our official conference partners will receive a set of mailing labels, including all conference attendees for a one-time-use mailing; content to be pre approved by STFM.

Demographics:

Date of Birth: ___/___/___

What is your current gender identity? (Select all that apply)

- Male/Man Female/Woman Genderqueer/Gender non-conforming Non-binary
 Prefer to self-describe Choose not to disclose

Which of the following best defines your race or ethnicity? (Select all that apply)

- American Indian/Alaska Native/Indigenous Asian Black/African American
 Hispanic/Latino/of Spanish Origin Middle Eastern/North African
 Native Hawaiian/other Pacific Islander White Choose not to disclose

One of both my parents (or whoever raised me) graduated from college: Yes No

Choose not to disclose

Underrepresented in medicine means those racial and ethnic populations that are under-represented in the medical profession relative to their numbers in the general population (Black/African-American, Hispanic/Latino/of Spanish Origin, American Indian/Alaska Native/Indigenous, Native Hawaiian/other Pacific Islander, and certain Asian ethnicities*). * Vietnam, Cambodia, Indonesia, and Laos

I self-identify as underrepresented in medicine: Yes No Choose not to disclose

Professional Role: *check all that apply*

- Administrator/Manager Behavioral/Social Science Specialist CEO/Executive Director
 Chief Medical Officer Coordinator Dean Dean-Assistant/Associate Department Chair
 Department Vice Chair DIO Faculty-Medical School Faculty-Residency Program Fellow
 Fellowship Director Health Educator/Dietician Medical Assistant Medical Director
 MSE/Clerkship Director Nurse Nurse Practitioner Pharmacist Physician Assistant
 Practicing Physician Program Director Program Director-Assistant/Associate QI Specialist
 Researcher Resident Retired Student

Additional Information:

First-time Attendee: Yes No

Dietary Restrictions: None Vegetarian Vegan Gluten-free Nut allergy

Other allergy: _____

I am requesting special ADA accommodations to fully participate in the conference: Yes No

Special Accommodations: _____

Emergency Contact Name: _____ Phone: _____

Health and Safety Policy: stfm.org/about/governance/statements/#43882

I have read and agree to the terms of STFM's health and safety policy.

STFM Ethics and Conduct Policy: stfm.org/about/governance/statements/#35832

I have read and agree to the terms of STFM's ethics and conduct policy.

PRE-CONFERENCE WORKSHOPS *Optional; Additional fees apply: Participants must pre-register.*

Saturday, May 3, 8 am–5 pm

PR01: Faculty for Tomorrow Workshop for Residents

Fee: \$50; Includes refreshments, training materials, CME; Lunch is not included. Attendance Limit: 100, Powered by the STFM Foundation

Saturday, May 3, 1–5 pm

PR02: Generative AI Bootcamp for Family Medicine Clinician Educators, Scholars, and Learners

Fee: \$150; Includes refreshments, training materials, CME; Lunch is not included. Attendance Limit: 150

PR03: CBME Intensive: Create Your Program's Personalized CBME Implementation Roadmap With the STFM CBME Task Force

Fee: \$150; Includes refreshments, training materials, CME; Lunch is not included. Attendance Limit: 60

OTHER CONFERENCE ACTIVITIES *Optional; Additional fees may apply: Participants must pre-register.*

Monday, May 5, 6:15 am

- **Marathonaki Fun Run and Walk;** A Benefit for the STFM Foundation
\$50 entry fee includes a shirt; □ sm □ med □ lg □ xl □ xxl

Monday, May 5, 2–3:30 pm

- **STFM Wellness Afternoon; STFM Book Club–Come Discuss Atul Gawande’s Book “Being Mortal”**

Join us at STFM’s first ever book club. “Being Mortal” is Gawande’s brief and accessible book that interweaves science, culture, and personal narrative with the goal of improving end-of-life care. Plan to read (or re-read) the book in advance and join us to discuss its message and its impact on your personal and professional life.

Price: \$0

Participant Limit: 50

Monday, May 5, 2–4 pm

- **STFM Wellness Afternoon; SLC Art Walk–Visual Thinking Strategies Tour**

Jeffrey Ring, PhD, Facilitator

This elective session is an interactive, participatory group experience in which we will look at art together according to the Visual Thinking Strategies approach (VTS).

As detailed in the article stfm.org/familymedicine/vol37issue4/Reilly250, the integration of medical humanities in resident education provides a rich, often enjoyable and refreshing experience for exploring the power of seeing with sustained attention, deep reflection, communal listening and team bonding, and the development of empathy. The VTS teaching methodology invites all participants to express their opinions of an artistic piece, receive positive affirmations for their contributions, value the contributions of others to deeper seeing what may not be initially visible, and to sustain attention on the artistic work.

This 2-hour session includes the viewing of art followed by debriefing and explaining the VTS approach, along with a conversation about applications to teaching. The final half hour provides an opportunity for participants to visit art on their own or in small groups, and to practice looking at art as we had done together as a group.

Location: To Be Determined

Price: \$0

Participant Limit: 25

Monday, May 5, 7:30–11 pm

- **STFM Foundation’s MediPalooza;** A Fundraiser for the STFM Foundation

\$50 ticket (Individual); \$500 Bronze package (8 tickets)

For more information and to purchase tickets, please visit: stfm.org/foundation/medipalooza

Tuesday, May 6, 12:30–1:30 pm

- **Creating a Wellness Plan for your Financial Life;** Join the STFM Foundation and Stephen Dunbar III, JD, CLU, executive vice president of Southeast Complex and Financial Advisor with Equitable Advisors, who will discuss getting started with a savings plan, maximizing benefits from a retirement plan, insurance, education, and estate planning.

Price: \$0

Participant Limit: 75

REGISTRATION FEES

The conference registration fee includes participation for all sessions. All registration fees are in US dollars. Register online at stfm.org/annual

	<u>By April 1</u>	<u>After April 1 & On-site</u>	
<input type="checkbox"/> Member	\$645	\$745	*This fee includes STFM membership for either active physician or active other family medicine educator membership categories. If you are an active other family medicine educator, you can join STFM today at stfm.org , and then register as a member for additional savings!
<input type="checkbox"/> Non-Member*	\$1040	\$1140	
<input type="checkbox"/> Emeritus	\$380	\$480	
<input type="checkbox"/> Fellow	\$420	\$520	
<input type="checkbox"/> Resident	\$380	\$480	
<input type="checkbox"/> Student	\$250	\$350	
<input type="checkbox"/> Residency/Clerkship/Dept Coordinator**	\$380	\$480	
<input type="checkbox"/> International***	\$420	\$520	
<input type="checkbox"/> One Day	\$390	\$490	**Coordinator and/or administrative staff member whose primary role is to provide administrative support to a family medicine department or residency program.
			***Reside outside United States and Canada

PAYMENT INFORMATION

Total Amount Enclosed: _____ *Total Registration Fee + Other Optional Fees*

Method of Payment:

Check Enclosed, Payable to STFM American Express Discover Mastercard Visa

Card Number: _____ CWV: _____ Expiration Date: _____

Name on Card: _____

Billing Zip Code: _____

Refund Policy: If a registrant cannot attend a conference for personal or work reasons, requests for refunds must be received in writing by STFM by April 1, 2025 to receive a 50% registration fee refund. No refunds will be issued after April 1, 2025 except for those emergencies addressed below:

Refund requests due to medical or weather emergencies at time of conference may be eligible for a 50% refund. If a registrant is unable to attend because of a weather emergency, the registrant must show that they attempted to reschedule their travel arrangements but could not get to the conference during the official conference dates. In the event of such cancellation request by a conference registrant, the registrant must provide STFM with official documentation to support their request. In the unlikely and extreme event that STFM is forced to cancel a conference, STFM is not responsible for fees or penalties that conference registrants may incur for non-refundable airline tickets or hotel deposits.

Mail this form with payment to:

STFM
11400 Tomahawk Creek Parkway, Suite 240
Leawood, KS 66211-2672

Or, fax this form with credit card information to (913) 906-6096

Or, email with credit card information to stfmooffice@stfm.org