



Course Enrollment Form

The Yale School of Medicine is accredited by the Accreditation Council for Continuing Medical Education to sponsor continuing medical education for physicians. This educational activity is designated for a maximum of **20 AMA PRA Category 1 Credits™**. Physicians should only claim credit commensurate with the extent of their participation in the activity.

To be enrolled and eligible to receive the full amount of CME credit towards Performance Improvement, you must complete this form and submit it to the Yale CME Office. All fields are required. The forms and instructions for Stages A, B, and C of this activity are also available on this website.

First Name: _____ Middle Initial: _____

Last Name: _____

Degree: _____ Specialty: _____

Street Address: _____

City: _____

State: _____ Zip Code: _____

Country: _____

Phone: _____

Fax: _____

E-mail: _____