## MIMS 2011 MANDALAY BAY HOTEL LAS VEGAS SEPTEMBER 16TH, 2011 www.mims2011.com

Take your practice into 2012 with the Internet tools and resources you need to generate and convert qualified leads economically and efficiently.

Name (First & Last):				_	
Contact Phone: E		Email Address:			
Profession:		Practice Name:			
Practice Phone: Practic		ce Email:			
Practice Address:				_	
actice Website: Type of F		ractice:			
Is this your first Internet marketing course Yes No	rnet marketing course? Where w Low		ould you rank your level in Internet marketing skill? Medium High		
Select Your Courses: Please select the 6 courses you would lik course takes 2 time slots, so you would charegistration desk the day of the event. Pl speaker online is not on this form.	noose 4 other courses.	We will have your	course schedule ready for you at	the	
Developing an Internet Marketing Plan - M. Dobkov	Online Consult	Online Consultations and Your Mobile Website - V. Marin			
How Design Affects Your Website - M. Havlicek	Lead Cycle Management - C. Lapointe				
Event Marketing Meets the Internet - J. Kissinge	☐ The State of SE0 in 2011 - 0. Birsen				
☐ Use Facebook Applications in Internet Marketing	g - M. Dobkowski	Local Search T	ips and Techniques - D. Rodecker		
Lost Profits & Maximizing Practice Revenue - J.	A Medical Practice in the Digital Age				
☐ Intro to Google Analytics - 0. Birsen	Organizing Your Complete Marketing Plan - Y. Martin				
Online Patient Portals & HIPPA Compliancy - P. S	☐ Internet Marketing Myth Busters - 0. Birsen				
☐ Top Resources for Managing your Marketing Inve	estment - C Lapointe	Converting Int	ernet Leads - B. Mercier		
Developing & Implementing a Social Media Presence - Workshop - J. Lindeman			☐ Video SEO Strategy - J. Lin and N. Healy		
☐ Bridging the Gap to Communication in the 21 Ce	ntury - J. Watson	Alternate Cour	se	_	
Type of Payment: Visa	MC _	AMEX 🔲	Certified Check		
Cardholder Name (First & Last):				_	
Cardholder Mailing Address:				_	
City:	State:		Zip Code:	_	
Cardholder Phone:					
ACCOUNT NUMBER:	CV C	ODE:	EXPIRATION DATE:	_	
AUTHORIZED SIGNATURE:				_	
Please fax form to 413-893-9042 Email Christine@aesthetics360.com or la	uradaesthetics360 com	with guestions			

Please make checks payable to Medical Internet Marketing, LLC

MIMS C/O Aesthetics 360

16045 Golf Club Drive

Crosby, TX 77532

Confirmation will be sent via email within a week of receipt