MEDICAL PHYSICS CONTINUING EDUCATION
SESSION ATTENDANCE REPORT

PROGRAM: 2026 MAC AAPM Annual Meeting **DATES: October 9-10, 2026**

LOCATION: __Baltimore, MD________________________________

ATTENDANCE SHEET: Please print your name and email address as recognized in the CAMPEP database—print carefully, each character must be unambiguous.

NAME: ____

EMAIL ADDRESS: ____

Speaker: ______________________ **Topic:** ____

I attended this entire session and request full credit €

I attended only part of this session and request credit for ______ minutes of attendance €

I did not attend this session €

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Form 7C/2008