

# Registration Form

## Personal information *(please type or print)*

Name \_\_\_\_\_

Job Title \_\_\_\_\_

Dept./Div. \_\_\_\_\_

Institution/Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Mobile \_\_\_\_\_

Email Address \_\_\_\_\_

## Additional Information

Are you a speaker?  No  Yes

Are you willing to moderate a session?  No  Yes

Do you have any special meal requirements (vegetarian, etc.)?  
 No  Yes (specify) \_\_\_\_\_

If your life had a theme song, what would it be?  
\_\_\_\_\_

Who is the person that has had the biggest impact on your professional life? \_\_\_\_\_

How many ASCLS Annual Meetings have you attended? \_\_\_\_\_

How old were you when you first set foot in a clinical laboratory?  
\_\_\_\_\_

What is the first concert you ever attended? \_\_\_\_\_

What is your Twitter handle? \_\_\_\_\_

## Registration Fees

### Full Registration

	Early (by June 16th)	Regular Registration	Onsite Registration
<input type="checkbox"/> ASCLS Professional / Collaborative Member	\$465	\$525	\$565
<input type="checkbox"/> ASCLS FYP Member	\$225	\$285	\$325
<input type="checkbox"/> ASCLS Emeritus / Honorary Member	\$125	\$145	\$165
<input type="checkbox"/> ASCLS Student Member	\$125	\$145	\$165
<input type="checkbox"/> Non-member / Customer	\$595	\$655	\$695

### One-Day Registration

<input type="checkbox"/> ASCLS Professional / Collaborative Member	\$240	\$240	\$265
<input type="checkbox"/> ASCLS FYP Member	\$225	\$240	\$265
<input type="checkbox"/> Non-member / Customer	\$300	\$300	\$325

Please select which day you will attend:  Monday  Tuesday  Wednesday  Thursday

### Guest/Spouse Registration

<input type="checkbox"/> Guest/Spouse	\$90	\$110	\$130
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Name of Guest/Spouse: \_\_\_\_\_

Total amount: \$ \_\_\_\_\_

## Method of Payment

Check enclosed, payable to ASCLS AM  
Purchase Order Number \_\_\_\_\_

*Please note: Registration is not considered complete until payment is received.*

To securely pay via credit card, please visit

**[www.ascls.org/annualmeeting](http://www.ascls.org/annualmeeting)**

## Mail this form with payment to:

**ASCLS**  
1861 International Drive, Suite 200  
McLean, VA 22102