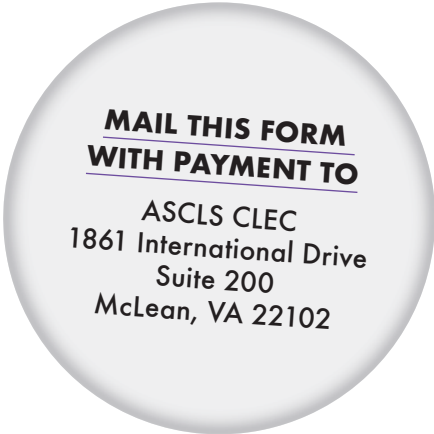




CLEC 2022 REGISTRATION FORM



Personal Information (please type or print)

Name _____

ASCLS Member Number _____

Job Title _____

Organization _____

Address _____

City _____ State _____ Zip _____

Daytime Phone _____

Email Address _____

What is your goal for the conference? _____

Are you a faculty member in a:

- MLT Program
- MLS Hospital-Based Program
- MLS University-Based Program
- Graduate Program
- None

How many years have you been teaching? _____

For In Person Registration, do you have any special meal requirements (vegetarian, etc.)?

- No Yes (specify) _____

	EARLY BIRD by Jan. 14	REGULAR by Feb. 18	ONSITE/LATE Mar. 14
ASCLS Professional Member	\$545 —in person \$445 —virtual	\$595 — in person \$495 —virtual	\$645 —in person \$545 —virtual
ASCLS Ascending & Developing Professional Member	\$445 —in person \$345 —virtual	\$495 —in person \$395 —virtual	\$545 —in person \$445 —virtual
Non-Member	\$675 —in person \$575 —virtual	\$725 — in person \$625 —virtual	\$775 — in person \$675 —virtual

Preconference Workshop: \$75/ASCLS member; \$95/non-member. Available to in-person attendees only.

METHOD OF PAYMENT

Check enclosed, payable to **ASCLS CLEC**

Purchase Order No. _____

To securely pay via credit card, please visit www.ascls.org/clec

Registration Type In Person Virtual

Registration Fee: \$ _____

Preconference Workshop: \$ _____

New ASCLS Member Dues \$ _____

TOTAL AMOUNT: \$ _____

QUESTIONS? Contact us at ascls@ascls.org or (571) 748-3770.