

Advance Meeting Registration Form

Pediatric Academic Societies' Annual Meeting
April 28 - May 1, 2001
Baltimore Convention Center, Baltimore, MD



Advance registration forms received after the close of business on March 21, 2001 will be returned and individuals will be required to register on site and pay on-site fees.

Register On-line
<http://www.aps-spr.org>

Be sure to complete all sections of the 3 page form. Advance Registrants will receive their badge and program packet by April 24, 2001.

Register early and SAVE!
Fees increase \$25 after March 1, 2001

PERSONAL DATA (Please Print)

Last Name _____ Degree _____

First Name _____ Middle Initial _____

BADGE NAME As you would like it to appear on your badge _____

City _____
State or Providence _____ Country _____

MAILING ADDRESS

Department _____

Institution _____

Street _____

City _____ State _____ Zip _____

Province _____ Country _____

Telephone # _____ Fax # _____

E-Mail _____

Subspecialty _____

MEMBERSHIP STATUS (Check all that apply)

- American Pediatric Society
- Society for Pediatric Research
- Ambulatory Pediatric Association
- American Academy of Pediatrics
- Guest, Trainee or Allied Health (Not a member of APS, SPR, APA)

SPECIAL ASSISTANCE

Administrative Use Only

Received _____
Processor _____
Date Processed _____
Check # _____
Charge Amex MasterCard Visa

**Avoid a duplicate registration fee (20%).
If you think you are already registered,
contact us at info@aps-spr.org.**

Return all 3 registration pages, please!

Registrant Last Name (Please Print)

REGISTRATION FEES - Registration fee includes a badge, program proceedings, and Abstracts-On-Disk® *Please Circle*

•Members and Guests	Early Bird	(Before 3/1/2001)	\$235
	Late Advance	(After 3/1/2001 & Before 3/21/2001)	\$260
•Emeritus (<i>Age 65 and Over</i>)			\$ 80
•Trainees: Students, Residents & Fellows in Training (<i>Letter of Status from Department must accompany this form</i>)			\$ 75
•Allied Health Professional - Non-Doctoral (<i>Technician, RN, NP, for example</i>)			
	Early Bird	(Before 3/1/2001)	\$160
	Late Advance	(After 3/1/2001 & Before 3/21/2001)	\$185

OTHER FEES

•Continuing Medical Education Certificate	\$ 50
•Abstracts <i>Pediatric Research</i> - Bound publication of all submitted abstracts	\$ 70
*Note: <i>Pediatric Research</i> subscribers and APA member <u>registrants</u> will automatically receive this publication.	
*Pre-purchased journals are available for pick-up at the meeting registration desk.	
Tickets will be mailed to you for on-site pick-up.	

Registration Fees: \$ _____

Other Fees: \$ _____

TOTAL FEES: \$ _____

Please Total

•Family Registration- Family members can only be registered on site - see page 4 of this preliminary program for fees.

PAYMENT OPTIONS - Payment MUST Be Enclosed - NO P.O.'S

- Check** (U.S. Funds Only) **Make payable to *Pediatric Academic Societies***
- Credit Card:** American Express MasterCard Visa

Print Cardholders Name: _____

Card Number: _____ Expiration Date: _____

Signature: _____

TICKETED EVENTS - Educational Seminars and Workshops

- Attendance is Limited - First Come, First Served. Early registration is strongly encouraged.
- Confirmation of assignments will be sent by April 6, 2001
- List choices by session code (example: ES15, WS10)



SATURDAY 4/28	1st Choice	2nd Choice	3rd Choice	SUNDAY 4/29	1st Choice	2nd Choice	3rd Choice
Educational Seminars (#01-12) <i>8:00am - 10:00am</i>				Workshop (#11-20) <i>8:00am - 11:00am</i>			
Workshops (#01-02) <i>8:30am - 11:30am</i>				Workshop (#21-29) <i>2:00pm - 5:00pm</i>			
				MONDAY 4/30	1st Choice	2nd Choice	3rd Choice
Educational Seminars (#13-26) <i>10:00/11:00am - 1:00pm</i>				Workshop (#30-39) <i>9:00am - 12:00pm</i>			
Workshops (#03-10) <i>12:00pm - 3:00pm</i>				TUESDAY 5/1	1st Choice	2nd Choice	3rd Choice
				Workshop (#40-49) <i>8:45am - 11:45am</i>			

Return all 3 registration pages, please!

Registrant Last Name (Please Print)

WHAT MOST CLOSELY DESCRIBES YOUR INVOLVEMENT IN PEDIATRICS? (Check all that are appropriate)

- Bench Research Clinical Research Teaching Private Practitioner Allied Health Professional

ARE YOU:

Faculty (academic rank) _____ Fellow (year) _____

Resident (year) _____ Medical Student (year) _____

Other _____

DO YOU PLAN ON ATTENDING ANY OF THE FOLLOWING MEETINGS WHICH MEET IN CONJUNCTION WITH THE PAS? (The collection of data here is for statistic purposes only) A separate registration fee may be required to attend meetings held by any of the societies listed below. See pages 8 and 9 of this program for further information.

- American Society of Pediatric Hematology/Oncology (ASPH/O) Association of Pediatric Program Directors (APPD)
 Pediatric Infectious Diseases Society (PIDS) Society for Developmental Pediatrics (SDP)

MEETING REGISTRATION SHOULD BE SUBMITTED BY ONE OF THE FOLLOWING METHODS:

- ☞ **ON-LINE:** (www.aps-spr.org) **Preferred Method**
- ☞ **BY FAX:** Credit Card Payments Only: (281) 419-0082
Important - Retain your facsimile transmission report as confirmation
- ☞ **BY MAIL:**
Return registration form with payment to:

PAS MEETING REGISTRATION
3400 Research Forest Dr., Suite B-7
The Woodlands, TX 77381
Phone: (281) 419-0052

CANCELLATION POLICY

A 20% administrative processing fee is withheld from all cancellations and duplicate registrations. No refunds will be issued after April 2, 2001.



IMPORTANT DATES & REMINDERS

March 1, 2001

Early Bird Registration must be received by the close of the business day (fees increase after this date).

March 21, 2001

Late Advance Registration Deadline
(Registration on-site at higher fees required after this date)

March 27, 2001

Housing Reservation Deadline (for special rates)

April 2, 2001

No refunds will be issued after this date

April 24, 2001

Registration materials received by those advance registered by 3/21/01

- ✓ **Register On-Line Instead and SAVE TIME!**
- ✓ Registration fee does not include CME certificate or abstract journal.
- ✓ Confirmation of registration will be sent within 2 weeks of receipt.
- ✓ Avoid a duplicate registration fee (20%). If you think you are already registered, contact us!
- ✓ A 20% administrative processing fee is withheld from all cancellations or duplicate registrations.
- ✓ No refunds after April 2, 2001.
- ✓ Advance Registrants will receive their badge and program packet by April 24, 2001.

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