



**Postgraduate Course and Annual Meetings of NASPGHAN, APGNN & CPNP
2020 REGISTRATION FORM**

- ◆ **Early-Bird Registration Deadline: September 3, 2020.** (To receive Early-Bird rates, envelopes must be postmarked no later than September 3rd, or standard rates will apply.)
- ◆ **After September 3rd, Standard Rates apply** and fees for Postgraduate Course and Annual Meetings increase by \$50.
- ◆ **After October 7th, rates increase** to on-site rates and fees for Postgraduate Course and Annual Meetings increase an additional \$50.
- ◆ Register online at [www.naspghan.org/annual meeting](http://www.naspghan.org/annual%20meeting)

Fill in below information with a complete address indicating where registration/meeting material should be mailed. Please print clearly.

First Name	Last Name
Address	
City	State
Zip	Country
Phone	Fax
Email (Required)	
Dietary Restrictions	

NASPGHAN Postgraduate Course, Thursday, November 5, 2020.

Check your member type	Early Bird Rates Deadline 9/03/20**	Standard Rates Deadline 10/07/20	After 10/07/20	Amount Owed
NASPGHAN Member	\$325	\$375	\$425	
Non-Member	\$500	\$550	\$600	
Trainee/Fellow Member	\$200	\$250	\$300	
Non-Member Trainee	\$250	\$300	\$350	
Psychologist Member	\$200	\$250	\$300	
Non-Member Psychologist	\$250	\$300	\$350	
Student/Resident	\$75	\$125	\$175	
APGNN Member	\$200	\$250	\$300	
Non-Member Nurse	\$250	\$300	\$350	
CPNP Member	\$200	\$250	\$300	
Non-Member Nutritionist	\$250	\$300	\$350	
Allied Health Professional	\$200	\$250	\$300	

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NASPGHAN Postgraduate Course Learning Lunches (Select One) Thursday, November 5, 2020.

You must be registered for the Postgraduate Course to attend a Learning Lunch.

Learning Lunches: \$25		Top three choices	Amount Owed
Indicate top three choices below, indicated by #1, #2, #3.			
1. GI bleeding			
2. Pancreatitis when medical/endoscopic therapy fails			
3. Managing complications: Cirrhosis			
4. Perianal/penetrating disease			
5. Biologics			
6. Diets and IBD			
7. What's the bloat about?			
8. IBS treatment: New therapies			
9. GI polyps			
10. EoE: New Therapies			

Annual Meetings of NASPGHAN, APGNN, and CPNP, Thursday evening, Friday and Saturday, November 5-7, 2020.

Your Registration will allow you access to all Annual Meeting sessions of NASPGHAN, APGNN and CPNP.

Check your member type		Early Bird Rates Deadline 9/03/20**	Standard Rates Deadline 10/07/20	After 10/07/20	Amount Owed
	NASPGHAN Member	\$350	\$400	\$450	
	Non-Member	\$525	\$575	\$625	
	Trainee/Fellow Member	\$200	\$250	\$300	
	Non-Member Trainee	\$250	\$300	\$350	
	APGNN Member	\$200	\$250	\$300	
	Non-Member Nurse	\$250	\$300	\$350	
	CPNP Member	\$150	\$200	\$250	
	Non-Member Nutritionist	\$200	\$250	\$300	
	Psychologist Member	\$200	\$250	\$300	
	Non-Member Psychologist	\$250	\$300	\$350	
	Student / Resident	\$75	\$125	\$175	
	Allied Health Professional	\$225	\$275	\$325	

Meet the Professor Breakfast Sessions. (Select one per day) Friday, November 6 and Saturday, November 7, 2020

You must be registered for the Annual Meeting of NASPGHAN, APGNN and CPNP to attend a Meet the Professor Breakfast.

Meet the Professor Breakfasts: \$40 each	
Indicate top three choices for each day below.	
Friday, November 6, 2020	
1. Endoscopia terapeutica (in Spanish) (<i>No Charge</i>)	
2. Women in medicine: How to envision and advocate for your career (<i>No Charge</i>)	
3. Cholestasis	
4. Nutrition in the medically complex child	
5. Transition of care	
6. Psychological interventions for GI	
7. Colorectal	
8. CAG-NASPGHAN Joint Meet the Professor Breakfast: Successful strategies to sustain a research career	
Saturday, November 7, 2020	
1. When your first biologic doesn't work	
2. Differential diagnosis for the poor feeder	
3. New imaging techniques/therapies	
4. The Leaky Child (persistent diarrhea)	

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Additional Events Friday and Saturday, November 6-7, 2020. There is no additional fee for these sessions.

These events are designed for Physicians only.

Indicate All Choices	Sessions Selected
Colonoscopy Skills Workshop 101 (Friday 10:30am-12:00pm)	
Colonoscopy Skills Workshop 101 (Saturday 10:30am-12:00pm) Repeat of Friday's Session	
Train the Pediatric Endoscopy Trainer Workshop (Friday 2:30pm – 4:00pm) Please note: in order to register for this session, you must have attended the Colonoscopy Skills Workshop 101 at either the 2019 or 2020 NASPGHAN conference.	
Hands on Motility (Saturday 8:30am-10:00am)	

NASPGHAN Teaching and Tomorrow Program

This program covers the PG Course and Annual Meeting attendance.

Eligibility: Eligibility: Pediatric Residents with an interest in pediatric gastroenterology, hepatology and nutrition. It is expected that those participating in the program will be the equivalent of a PL-2 resident at the time of the meeting or PL-3 residents considering applying for fellowship to begin in July 2021. The Teaching and Tomorrow Program is not designed for residents currently in the process of interviewing for fellowship.

Support: Registration includes the Postgraduate Course, Annual Meeting and all the Teaching and Tomorrow events. This includes orientation breakfast on Thursday, a luncheon program on Thursday, a reception on Friday and the closing breakfast on Saturday morning.
Participants or sponsoring institutions will be responsible for all travel and hotel costs associated with the meeting.

Check here to indicate your selection	Amount Owed
Teaching and Tomorrow Program	\$200.00

Social Event held at the Prado at Balboa Park, Saturday, November 7, 2020, 7:00pm – 10:00pm:

Indicate All Choices	Fee	Amount Owed
Saturday Social Event	No charge Indicate if you are attending	Yes No
Extra Ticket(s) for Saturday Social Event (Adult)	\$75	
Extra Ticket(s) for Saturday Social Even (Child)	\$25	

NASPGHAN Foundation 5K Registration, 6:00 AM, Saturday, November 7, 2020.

Please complete the liability wavier along with your registration.

Check here to indicate your selection	Fee	Amount Owed
5K	\$25.00	
Donation, I prefer not to run		

TOTAL OF ALL ABOVE TRANSACTIONS: _____

Payment Information: ☐ MasterCard ☐ Visa ☐ Discover ☐ American Express

Credit Card #: _____ Verification Code #: _____ Expiration: _____

- ◆ Make checks (drawn on a US bank in US funds) payable to NASPGHAN (Mail or Fax completed form to: NASPGHAN / 714 N. Bethlehem Pike, Suite 300 / Ambler, PA 19002 Fax: 215-641-1995)
- ◆ Contact NASPGHAN National Office if further information is needed
Phone: 215-641-9800 / Fax: 215-641-1995 / members@naspghan.org / www.naspghan.org

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◆ NASPGHAN Federal Tax ID: 84-126-4996

What's Included:

- ◆ NASPGHAN Postgraduate Course – Registration fees include Postgraduate course syllabus, continental breakfast, and coffee breaks
- ◆ Annual Meetings of NASPGHAN, APGNN, CPNP – Registration fees for the Annual Meeting include the reception on Thursday evening, continental breakfast on Friday and Saturday morning, light lunch on Friday and Saturday, coffee breaks, social event on Saturday evening.

Cancellation and Refunds:

Written cancellation and refund requests must be received on or before **October 7, 2020**. Requests will not be honored after this date. A registration receipt must accompany requests. A refund of the registration fee, minus a \$50 administrative fee, will be issued after the meeting for **all** refunds requested on or before October 7, 2020.

Please indicate you understand this policy with a signature: _____

Mail refund requests to:

NASPGHAN Annual Meeting Registration / 714 N. Bethlehem Pike, Suite 300 / Ambler PA 19002

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NASPGHAN 5K Liability Waiver Form

Race Date: Saturday, November 7, 2020

5:00am Registration 6:00am Race Starts

San Diego, CA

Last Name: _____ First Name: _____

Address: _____

City: _____ State _____ ZIP _____

Phone: _____ Fax: _____ Email: _____

Emergency Contact: _____ Phone: (____) ____-_____

Liability Waiver: Upon acceptance of my entry, I, for myself my heirs and assigns, hereby release the City of Las Vegas, Nevada, Las Vegas Running Tours; NASPGHAN and the NASPGHAN Foundation, all sponsors, and other entities involved with the production of this event from any and all liability arising from illness, injury or death I may suffer as a result of my participation in this event. I attest that I am physically fit and have trained for this event and am aware that my participation could, in some circumstances, result in injury. Should officials determine that completion of this event would be injurious to my health, I consent to be removed and treated by the medical personnel in attendance or their direction. I give permission for free use of my name and picture in any broadcast, telecast or written account of this event. Race will be held rain or shine. NO REFUNDS.

Signature: _____ Date _____

NASPGHAN
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Fax: 215-641-1995/ Phone: 215-641-9800
members@naspghan.org
www.naspghan.org

NASPGHAN Foundation Federal Tax ID: 76-0585072

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