



Early Bird Registration
ASCCP2019 Annual Scientific Meeting
on Anogenital & HPV-Related Diseases
 April 4-7, 2019 | Atlanta, Georgia

Name: _____

Company/Institution: _____

Address: _____

City: _____ State/Province: _____ Postal Code: _____

Country: _____ Email: _____ Phone: _____

Credentials Select all that apply):

- | | | | | | |
|---------------------------------|------------------------------|--------------------------------|------------------------------|----------------------------------|--------------------------------|
| ☐ ANP | ☐ BSN | ☐ FNP | ☐ MPH | ☐ PA-C | ☐ WHNP |
| ☐ AOCN | ☐ CNA | ☐ LPN | ☐ MSc | ☐ PhramaD | ☐ Other |
| ☐ AOCNP | ☐ CNM | ☐ MBChB | ☐ MSN | ☐ PANCE | _____ |
| ☐ ARC-PA | ☐ DNP | ☐ MD | ☐ NP | ☐ RN | _____ |
| ☐ ARNP | ☐ DO | ☐ MPH | ☐ NR | ☐ PhD | _____ |

Registration (Early Bird Registration ends January 31, 2019):

- | | | | |
|--|---------|--|---------|
| ☐ Physician Member * | \$1025 | ☐ Non-medical Industry Consultant | \$1,295 |
| ☐ Physician Non-Member | \$1,275 | ☐ International World Bank Physician*** | \$545 |
| ☐ Researcher/Physician Assistant/Nurse
/Nurse Practitioner/Midwife Member* | \$895 | ☐ International World Bank Researcher/Physician
Assistant/Nurse /Nurse Practitioner/Midwife*** | \$545 |
| ☐ Researcher/Physician Assistant/Nurse
/Nurse Practitioner/Midwife Non- Member | \$1,095 | ☐ Emeritus Member* | \$0 |
| ☐ Resident/Student Member* | \$825 | Pre-Courses | |
| ☐ Resident/Student Non-Member** | \$875 | ☐ LEEP | \$275 |
| | | ☐ Advanced Discussion in Vulvar Vaginal Diseases | \$275 |
| | | ☐ Vulvar Surgery Skills Workshop | \$275 |
| | | ☐ Complicated Colposcopy Cases | \$275 |

*Must be a current ASCCP member at the time of registration.

**Residents/Students registering as a non-member will be asked to provide a letter from their Department Chair confirming residency status or a copy of their student id card.

***The World Bank rate is available only to those who reside in countries declared 'Lower-Middle' and 'Low' income by the World Bank. Visit www.worldbank.org/en/country to view your country's status.

Add-On Course

- | | |
|--|------|
| ☐ Educate the Educator: HPV Vaccine & Cervical Cancer Screening | FREE |
|--|------|

TOTAL \$ _____

Payment Information:

Method: ☐ Check (Checks may be mailed to the ASCCP Office at the address below.)

Credit Card: ☐ Visa ☐ American Express ☐ Discover ☐ MasterCard

Credit Card Number: _____

Expiration Date _____ / _____ Security Code: _____
 (Month) (Year)

Name on Card: _____

Cancellation Policy: Written cancellation must be received at least 30 days prior to the start of the course. Any notice received by this time will be refunded, less a \$100.00 administrative fee. No refunds will be made after this time.
 Photographs and/or video taken at the ASCCP2019 may be used in future ASCCP marketing, publicity, promotions, advertising, social networking, and training activities. By registering and attending, you agree to allow ASCCP to use the photographs and/or video materials.