



Registration Form
2013 Oncology Pharmacy Preparatory
Review Course
May 2-4, 2013
Chicago, Illinois



Name _____
 (please print first, middle initial, last)

Name Tag _____
 (please print as you wish your nametag to read)

Institution _____

Mailing Address _____
 _____ Street
 _____ City _____ State _____ ZIP _____

Work Telephone (____) _____-_____ Fax (____) _____-_____ E-mail _____
 (required)

EARLY registration deadline is March 21, 2013. LATE registration deadline is April 18, 2013. ON-SITE registration fees apply if registration is received after April 18, 2013. Cancellations received before April 18, 2013 will be charged a \$75 administrative fee. Registration fees *cannot* be refunded for cancellations received on or after April 18, 2013.

Registration Fees	Early	Late	On-site	Total
ACCP, ASHP, or HOPA member	\$460	\$515	\$585	\$
Nonmember	\$695	\$770	\$875	\$
ACCP, ASHP, or HOPA member student, resident, fellow	\$245	\$310	\$405	\$
Nonmember student, resident, fellow	\$385	\$465	\$550	\$
ACCP, ASHP, or HOPA member – BCOP Recertification version of the course (posttest included)*	\$510	\$565	\$635	\$
Nonmember – BCOP Recertification version of the course (posttest included)*	\$745	\$820	\$925	\$
Oncology Course Online—Course attendees only		\$140		\$
Oncology Course CD-ROM		\$140		\$
Oncology Print Workbook		\$75		\$
Total				\$

*Provides access to Web-based post-test for recertification as a Board Certified Oncology Pharmacist

Ø I will be taking this course for BCOP Recertification credit. BPS # _____

PAYMENT METHOD

Please enclose a check or money order payable in U.S. funds to the **American College of Clinical Pharmacy**, or

Charge to: Visa MasterCard Discover American Express

Account Number: _____ Expiration Date: _____

Security Code (3- or 4-digit code on front or back of credit card): _____

Cardholder Name (print): _____ Authorized Signature: _____

Billing Zip Code: _____

SEND TO: American College of Clinical Pharmacy
 13000 W. 87th St. Parkway, Suite 100; Lenexa, KS 66215
 Telephone: (913) 492-3311
 Fax: (913) 492-0088 (If you fax your registration, please do not mail it.)

You should receive a confirmation letter by email within 2 weeks of registration. If you do not receive an email, call ACCP at (913) 492-3311.