

**ACCP 2010 Spring Practice and Research Forum and Updates in Therapeutics: The Pharmacotherapy Preparatory Course**

Your Name: \_\_\_\_\_

EARLY registration deadline is March 12, 2010. LATE registration deadline is April 9, 2010. ON-SITE registration fees apply if registration is received after April 9, 2010. Registration fees CANNOT be refunded for cancellations received after April 9, 2010.

Full registration includes Opening Reception, all meeting sessions, Spring Forum course handouts, and CE credit. One-day registration includes all activities for specific day, Spring Forum course handouts, and CE credit. Registration does NOT include Preparatory Course handouts.

**Full Meeting Registration**

|                           | Early | Late  | On-site | Total |
|---------------------------|-------|-------|---------|-------|
| Member                    | \$460 | \$570 | \$640   | _____ |
| Nonmember*                | \$740 | \$850 | \$930   | _____ |
| <i>Resident or Fellow</i> |       |       |         |       |
| Member                    | \$190 | \$240 | \$280   | _____ |
| Nonmember*                | \$280 | \$330 | \$370   | _____ |

\*First-time meeting attendees who have never previously been an ACCP member and who register and pay for the full meeting will automatically receive a complimentary 6-month membership in ACCP. Check here to decline this offer.

**I-Day Meeting Registration**

|  | Early | Late  | On-site | Total |
|--|-------|-------|---------|-------|
| Check one:   |       |       |         |       |
| <input type="checkbox"/> Friday** <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday |       |       |         |       |
| **Does not include premeeting symposia.  |       |       |         |       |
| Member   | \$230 | \$280 | \$310   | _____ |
| Nonmember  | \$340 | \$380 | \$410   | _____ |
| <i>Resident or Fellow</i>  |       |       |         |       |
| Member   | \$100 | \$130 | \$150   | _____ |
| Nonmember  | \$140 | \$180 | \$200   | _____ |

**Pharmacotherapy Preparatory Course**

|                         | Total       |
|-------------------------|-------------|
| Book (printed handouts) | \$30 _____  |
| CD-ROM and MP3          | \$110 _____ |
| Online                  | \$110 _____ |

Available only to those (member/nonmember) who paid full meeting registration (above) for the Spring Forum/Preparatory Course. The CD-ROM and MP3 files will be available June 1, 2010. The online version will be available June 1, 2010.

**Student Registration**

|                                  |       | Total |
|----------------------------------|-------|-------|
| <i>Full Meeting Registration</i> |       |       |
| Member                           | \$130 | _____ |
| Nonmember                        | \$180 | _____ |

For student group discounts, contact Jon Poynter; telephone: (913) 492-3311 x21; e-mail: jpynter@accp.com.

**Career Development Symposium Registration**

**Friday, April 23, 2:30 p.m.–5:00 p.m.**

This symposium is included with paid student registration. Please check the box if you plan to attend.

**Premeeting Symposia Registration**

**Friday, April 23**

Premeeting symposium registration includes course syllabi and CE credit for a specific course.

|                                 | Early | Late  | On-site | Total |
|---------------------------------|-------|-------|---------|-------|
| <b>Clinical Practice Primer</b> |       |       |         |       |
| 8:00 a.m.–5:00 p.m.             |       |       |         |       |
| Member                          | \$190 | \$250 | \$290   | _____ |
| Nonmember                       | \$300 | \$350 | \$380   | _____ |

*Student, Resident, Fellow*

|           |       |       |       |       |
|-----------|-------|-------|-------|-------|
| Member    | \$100 | \$120 | \$140 | _____ |
| Nonmember | \$140 | \$160 | \$180 | _____ |

**Leadership Primer**

8:00 a.m.–4:30 p.m.

|           |       |       |       |       |
|-----------|-------|-------|-------|-------|
| Member    | \$190 | \$250 | \$290 | _____ |
| Nonmember | \$300 | \$350 | \$380 | _____ |

*Student, Resident, Fellow*

|           |       |       |       |       |
|-----------|-------|-------|-------|-------|
| Member    | \$100 | \$120 | \$140 | _____ |
| Nonmember | \$140 | \$160 | \$180 | _____ |

**Research Primer**

8:00 a.m.–5:15 p.m.

|           |       |       |       |       |
|-----------|-------|-------|-------|-------|
| Member    | \$190 | \$250 | \$290 | _____ |
| Nonmember | \$300 | \$350 | \$380 | _____ |

*Student, Resident, Fellow*

|           |       |       |       |       |
|-----------|-------|-------|-------|-------|
| Member    | \$100 | \$120 | \$140 | _____ |
| Nonmember | \$140 | \$160 | \$180 | _____ |

**Planning for Effective Teaching**

8:00 a.m.–12:15 p.m.

|           |       |       |       |       |
|-----------|-------|-------|-------|-------|
| Member    | \$100 | \$130 | \$150 | _____ |
| Nonmember | \$150 | \$180 | \$200 | _____ |

*Student, Resident, Fellow*

|           |       |       |       |       |
|-----------|-------|-------|-------|-------|
| Member    | \$60  | \$80  | \$90  | _____ |
| Nonmember | \$100 | \$120 | \$130 | _____ |

**REGISTRATION INFORMATION**

Name: \_\_\_\_\_

ACCP Membership ID No.: \_\_\_\_\_

Title: \_\_\_\_\_

(Students) Name of your college of pharmacy: \_\_\_\_\_

(Students) Your anticipated date of graduation: \_\_\_\_\_

Institution: \_\_\_\_\_

Mailing address (  home  work): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Country: \_\_\_\_\_

Daytime telephone: (\_\_\_\_) \_\_\_\_\_ Fax No.: (\_\_\_\_) \_\_\_\_\_

E-mail address (required): \_\_\_\_\_

**NAME BADGE INFORMATION**

Name (18 characters maximum): \_\_\_\_\_

Institution (25 characters maximum): \_\_\_\_\_

City, state: \_\_\_\_\_

Is this your first ACCP meeting?  Yes  No

**My primary purpose in registering for the meeting is to attend:**

- Spring Forum sessions  Academy sessions  
 Preparatory Course sessions

**ACCOMPANYING PERSON REGISTRATION**

Includes Opening Reception. No. of badges \_\_\_\_\_ × \$45 each

Name: \_\_\_\_\_  
*(Please print name legibly.)*

**STUDENT AND RESIDENT/FELLOW TRAVEL AWARDS**

If you would like to make a tax-deductible contribution to help support student or resident/fellow attendance at an ACCP meeting, please check one of the boxes below. All funds collected by the Student and Resident/Fellow Travel Award Funds are applied directly to student or resident/fellow meeting support; no funds are used for administrative or overhead expenses.

**Student Travel Award**

Amount of contribution (please check one):  \$10  \$25  \$50  
 \$\_\_\_\_\_ Other (please specify amount) Total \_\_\_\_\_

**Resident/Fellow Travel Award**

Amount of contribution (please check one):  \$10  \$25  \$50  
 \$\_\_\_\_\_ Other (please specify amount) Total \_\_\_\_\_

**METHOD OF PAYMENT**

Total \$ \_\_\_\_\_

**Check or money order payable in U.S. funds to American College of Clinical Pharmacy**

Credit card  
 MasterCard  Visa  Discover  American Express

Card No.: \_\_\_\_\_

Expiration date: \_\_\_\_\_

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

Cardholder's name (print): \_\_\_\_\_

Cardholder's telephone No.: \_\_\_\_\_

Authorized signature: \_\_\_\_\_

**HOW TO REGISTER**

- ONLINE** at [www.accp.com](http://www.accp.com)
- FAX** your registration form (both pages) to (913) 492-0088.
- TELEPHONE** your registration to (913) 492-3311.
- MAIL** your registration form (both pages) with check or money order to:  
 American College of Clinical Pharmacy  
 13000 West 87th Street Parkway, Suite 100  
 Lenexa, KS 66215-4530

**REGISTRATION CONFIRMATION**

You should receive a confirmatory e-mail within 2 weeks of registration. If you do not receive an e-mail, please call ACCP at (913) 492-3311.

**CANCELLATION POLICY**

An administrative fee of \$50 will be charged for full or 1-day meeting registrations canceled on or before April 9, 2010. An administrative fee of \$30 will be charged for premeeting symposia registrations canceled on or before April 9, 2010. An administrative fee of \$30 will be charged for any registrations transferred before April 9, 2010.

Requests for cancellation must be sent in writing to ACCP (fax: [913] 492-0088). Registration fees CANNOT be refunded for cancellations received after April 9, 2010.

**PHOTO RELEASE**

By registering for the ACCP 2010 Spring Forum/Preparatory Course or its associated events, you have provided your release for free use by ACCP for promotional purposes of any photograph taken of you or in which you may be seen during the ACCP 2010 Spring Forum/Preparatory Course.

**QUESTIONS?**

Call ACCP at (913) 492-3311 or visit the ACCP Web site at [www.accp.com](http://www.accp.com).