

# CHICAGO ALL ACCESS IN-PERSON REGISTRATION FORM

FOR THE LATEST INFORMATION ON AACC'S COVID SAFETY PLAN, VISIT [meeting.aacc.org/about/covid19-safety-plan](https://meeting.aacc.org/about/covid19-safety-plan).

Source Code: 579624

Promo Code: \_\_\_\_\_

## HOW TO REGISTER FOR IN-PERSON ATTENDANCE

- PRINT OR TYPE INFORMATION ON ALL PAGES.
- Make a copy of all pages for your files.
- Submit all 4 pages of this form.
- Include registrant name on all pages of the form.
- Full payment of all fees (in U.S. dollars payable through a U.S. Bank) must accompany this form for registration to be processed.
- For questions, call +1.508.743.8506.

**Deadline: Early registration discount ends June 9, 2022.**

**Advanced discount deadline is July 23, 2022.**



### ONLINE

[meeting.aacc.org](https://meeting.aacc.org)  
(Credit card payments only)



### MAIL

AACC Customer Service  
900 Seventh Street, NW, Suite 400  
Washington, DC 20001



### FAX

+1.508.743.3639  
(Credit card payments only). Fax copy will be considered original. To avoid duplication, do not mail original.

*Credit card information cannot be accepted via email due to security protocols.*

**Personal Information** Complete this information EXACTLY as you want it to appear on your badge. You will receive a confirmation at the email listed below within two weeks of receipt of this form and full payment.



Check here if you require special services. Please describe special services:

## I. PERSONAL INFORMATION (form must be printed or typed in English) \*Required field

MEMBER ID# \_\_\_\_\_ DEGREE \_\_\_\_\_

FIRST/GIVEN NAME\* \_\_\_\_\_ MIDDLE NAME \_\_\_\_\_

LAST/FAMILY NAME\* \_\_\_\_\_

TITLE\* \_\_\_\_\_

INSTITUTION\* \_\_\_\_\_

DEPARTMENT \_\_\_\_\_

STREET ADDRESS\* \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY/PROVINCE\* \_\_\_\_\_ STATE \_\_\_\_\_

POSTAL CODE\* \_\_\_\_\_ COUNTRY\* \_\_\_\_\_

### Be sure to complete this information:

BUSINESS PHONE\* \_\_\_\_\_ CELL PHONE\* \_\_\_\_\_

(Used for safety, emergency, and health related SMS messaging).

EMAIL ADDRESS\* \_\_\_\_\_

*Email must be valid and unique as this is how you will log into the digital platform.*

Your confirmation will be sent to the email address above. You can also send the confirmation/receipt to an alternate email below (e.g., your accounts payable department).

ALTERNATE EMAIL \_\_\_\_\_

**AACC communication options:** You will be automatically enrolled to receive mail and email based on AACC's standard privacy options unless you have previously modified your AACC communication settings.

**EU and Canadian Residents:** If you are new to AACC, you will be automatically opted out. If you want to **opt in**, check the desired boxes:  AACC email  AACC mail

*To view the AACC privacy policy and to modify your communication preferences, when you receive your receipt, log in to [aacc.org](https://aacc.org) and select "My Profile."*

## EXHIBITOR COMMUNICATIONS: EXHIBITORS SUPPORT AACC'S ACTIVITIES, AND WE ENCOURAGE YOU TO SUPPORT THEIR EFFORTS.

Exhibitors will send attendees information before and after the Expo via standard mail.

- Please do not share my mailing address with exhibitors.

Your mailing address, phone number, and email will be encoded on your badge.

**If** you choose to have your badge scanned in the Exhibit Hall or at industry sponsored events, Exhibitors will use this information to contact you after the meeting. Cell phone numbers will not be shared.

- Please do not encode my email address on my badge.

REGISTRANT'S NAME \_\_\_\_\_

**II. YOUR INFORMATION** The following information MUST BE completed to process your application.**1. Which best describes your organization's primary function?***(Select the one that most closely matches yours)*

- 01 Laboratory/Laboratory System  
 02 Hospital/Health System/Health Clinic  
 03 Community Health Center  
 04 Blood Center/Blood Bank  
 05 Diagnostics Company  
 06 Medical Device Company  
 07 Pharmaceutical Company  
 08 Pharmaceutical Research  
 09 Biotechnology Company  
 10 OEM Company  
 11 Distributor  
 12 Consulting Company  
 13 Laboratory Information Systems/Informatics Company  
 14 Investment Company/Industry Analyst  
 15 Contract Research Organization  
 16 Government Agency  
 17 Educational Institution  
 18 Non-profit Association  
 19 Retired from full-time employment  
 20 Other (please specify): \_\_\_\_\_

*If you answered that you are primarily a Laboratory/Laboratory System, answer 2–6. If not, skip to question 7.***2. Please select the type of laboratory that most closely matches yours**

- 01 University Hospital Laboratory  
 02 Managed Care/Coordinated Care Network/Healthcare System  
 03 State/County/Local Hospital Lab System  
 04 Clinical Laboratory  
 05 Private Hospital Laboratory  
 06 Independent Laboratory  
 07 Physician Office Laboratory  
 08 Veterans/Military Hospital Laboratory  
 09 Government/Public Health Laboratory  
 10 Commercial Laboratory  
 11 Reference Laboratory  
 12 Research Laboratory  
 13 Diagnostics Manufacturer Lab  
 14 Pharmaceutical Laboratory  
 15 Forensic Lab  
 16 Direct-to-Consumer Laboratory (pharmacy, retail, etc.)  
 17 Urgent Care Center Laboratory

*If you answered Managed Care/Coordinated Care Network/Healthcare System in 2, please answer 3:***3. How many sites are in your Coordinated Care Network?**

- 01 (1–5)  
 02 (6–10)  
 03 (11–15)  
 04 (16+)

**4. If you work in a hospital lab, how many beds are in your hospital?**

- 01 (0–199)  
 02 (200–399)  
 03 (400–599)  
 04 (600+)

**5. What are the functions of your lab?***(Select all that apply)*

- 01 Biochemistry  
 02 Blood Banking  
 03 Chemistry  
 04 Clinical Trials  
 05 Coagulation  
 06 Core Lab  
 07 Forensic Testing  
 08 Genetic Testing  
 09 Hematology  
 10 Immunology  
 11 Microbiology  
 12 Molecular Testing  
 13 Pediatric/Newborn Screening  
 14 Point-of-Care Testing  
 15 Toxicology  
 16 Transfusion Medicine  
 17 Veterinary Testing  
 18 Additional Functions (please specify): \_\_\_\_\_

**6. What role(s) do you play in the acquisition of systems and/or instruments for your lab?***(Select all that apply)*

- 01 Evaluate options for purchase  
 02 Recommend products  
 03 Participate in team evaluation  
 04 Assess product after purchase  
 05 Final selection  
 06 No role

**7. What is the highest degree (or equivalent) you hold?**

- 01 Doctoral Degree (PhD)  
 02 Medical Degree (MD)  
 03 MD and PhD  
 04 Master's Degree (MA/MS/MBA)  
 05 Bachelor's Degree (BA/BS/BSMT)  
 06 Nurse Practitioner  
 07 Physician Assistant  
 08 RN  
 09 LPN  
 10 JD  
 11 MBA and JD  
 12 PharmD  
 13 PharmD and PhD  
 14 Associate's Degree  
 15 High School Graduate

**8. What is your primary job function?**

- 01 Lab Director/Assistant Director  
 02 Lab Manager  
 03 Scientific Director  
 04 Medical Director  
 05 Lab/Medical Technologist (Supervisory)/Lead Tech  
 06 Lab/Medical Technologist (Non-Supervisory)  
 07 President/VP/Other Executive  
 08 Pathologist  
 09 MD/Clinician  
 10 Nurse  
 11 Pharmacist  
 12 Hospital Administrator  
 13 Chief Medical Officer  
 14 Clinical Chemist  
 15 Point-of-Care Testing  
 16 Quality Assurance  
 17 Cytotechnologist  
 18 Lab Information Systems  
 19 Scientific Affairs  
 20 Research or Development Scientist/Engineer  
 21 Manufacturing/Operations  
 22 Marketing/Sales  
 23 Analyst  
 24 Regulatory Affairs  
 25 Educator  
 26 Student/Fellow  
 27 Consultant  
 28 Retired

**9. What is your age?**

- 01 (under 25)  
 02 (25–39)  
 03 (40–44)  
 04 (45–54)  
 05 (55–64)  
 06 (65–74)  
 07 (75 and over)  
 08 Prefer not to answer

**10. What is your gender?**

- 01 Male  
 02 Female  
 03 Prefer not to answer

**11. Which of the following best describes your business interests at this meeting?***(Select one)*

- 01 Evaluate/acquire lab products or services for the lab or practice  
 02 Market lab products or services  
 03 Evaluate OEM suppliers, distribution opportunities or technology licensing  
 04 Solicit OEM, distribution or other B2B collaborations  
 05 No product or business interest  
 06 Other (please specify): \_\_\_\_\_

**12. Do you hold a MLT, MT (ASCP), MLS, ASCP or C (ASCP) certification?**

- 01 Yes  02 No

**13. When visiting the Clinical Lab Expo which solutions will you seek?** *(Select all that apply)*

- 01 Contract Manufacturer  
 02 Diagnostic IT Solutions  
 03 Diagnostic Testing  
 04 Diagnostic Tools Manufacturer  
 05 Equipment Manufacturer  
 06 Lab Testing Services  
 07 Parts Supplier  
 08 Professional Organization  
 09 R&D  
 10 Reagents Distributor  
 11 Regulatory  
 12 Solutions Support  
 13 Subject Area (Cancer Markers, Cardiac Markers, Pharmacogenomics, Tumor Markers)  
 14 Supporting IT Solutions  
 15 Testing Compliance

**III. MEMBERSHIP**

If your AACC membership will expire before the last day of the meeting (July 28, 2022), then you must renew your membership when you register to be eligible for the member discount. Your renewed membership will be valid for one year from the date your payment is processed or one year from your current expiration date, whichever is later. You can find your current expiration date by logging on to your profile on [aacc.org](http://aacc.org).

- Join AACC today (Professional membership \$244)  
 Renew my membership (and current membership options)  
 Renew my membership (and current membership options) **if** my current membership expires before July 28, 2022

REGISTRANT'S NAME \_\_\_\_\_

**IV. IN-PERSON CONFERENCE REGISTRATION FEES**

Please check choice(s)

	EARLY Received by 6/9	ADVANCED Received 6/10-7/23	ONSITE Or received after 7/23
<b>All Access Registration (Full Conference)</b>			
<input type="checkbox"/> 01 AACC Member (Professional, Professional Affiliate, and Transitional)*	\$640	\$785	\$825
<input type="checkbox"/> 01E AACC Express Member	\$945	\$1,190	\$1,240
<input type="checkbox"/> 02 Non-member	\$945	\$1,190	\$1,240
<input type="checkbox"/> 03 AACC Trainee Member	\$205	\$215	\$225
<input type="checkbox"/> 03 Trainee/Student Non-member <i>Includes a one-year AACC Trainee Membership. Discounted fees are a benefit of membership. Proof of full-time trainee status required.</i>	\$245	\$255	\$265
<input type="checkbox"/> 04 AACC Emeritus Member	\$205	\$215	\$225
<b>Sunday Only Daily Registration</b>			
<input type="checkbox"/> 05 (Includes entrance to AACC Opening Mixer and Opening Plenary Session, and the Sunday Special Session)	\$0	\$0	\$0
<b>Daily Registration (Monday-Thursday)</b>			
Check days that apply:	\$485	\$600	\$625
<input type="checkbox"/> 06 Mon <input type="checkbox"/> 07 Tues <input type="checkbox"/> 08 Wed <input type="checkbox"/> 09 Thurs			
<b>Guest/Spouse Registration</b>			
<input type="checkbox"/> 10 Guest/Spouse	\$205	\$220	\$230

\*The AACC Member registration fee includes access to the conference recordings. (See pg 4.)

Spouse/Guest First/Given Name: \_\_\_\_\_

Last/Family Name: \_\_\_\_\_

**V. TICKETED SESSIONS**

Tickets are not required unless you wish to attend a Roundtable or AACC University session. Only these ticketed sessions are displayed below. There will be a link to search all sessions in your confirmation email and on the AACC website.

Individuals registered as a guest/spouse may not register for ticketed sessions or receive continuing education credits.

Indicate your preference by session number.

**A. AACC University (190000 Series)**

All courses are held on Sunday, July 24. An All Access (conference) registration is not required; only fees for individual courses.

	EARLY Received by 6/9	ADVANCED Received 6/10-7/23	ONSITE Or received after 7/23
<b>Half Day Session</b>			
Member	\$155	\$185	\$190
Non-member	\$205	\$245	\$255
<b>Full Day Session</b>			
Member	\$280	\$310	\$325
Non-member	\$330	\$365	\$380

**Sunday Morning Sessions**  
 191001  191002  191003  191004

**Sunday Afternoon Sessions**  
 192005  192006  192007  192008  192009

**Full Day Sessions**  
 193010  193011  193012  193013  193014

Total # of Sessions \_\_\_\_\_ Total \$ \_\_\_\_\_

**B. Roundtable Sessions**

\$25 each (received by July 23)

\$30 each (onsite or received after July 23)

AACC Member/Non-member. Meal is not included.

**Morning Sessions (40000 Series) Afternoon Sessions (50000 Series)**

		1st Choice	2nd Choice	3rd Choice
MONDAY:	Morning:	_____	_____	_____
	Afternoon:	_____	_____	_____
TUESDAY:	Morning:	_____	_____	_____
	Afternoon:	_____	_____	_____
WEDNESDAY:	Morning:	_____	_____	_____
	Afternoon:	_____	_____	_____

Total # of Sessions \_\_\_\_\_ Total \$ \_\_\_\_\_

**VI. SPECIAL EVENTS**

**88 SYCL Workshop: Harnessing Laboratory Data for the Non-Programmer**

Saturday, July 23, 2022 • AACC Member/Non-member: \$50

# of Tickets \_\_\_\_\_ \$ \_\_\_\_\_

**91 26th Annual Management Sciences and Patient Safety Leadership Symposium**

Sunday, July 24, 2022 • AACC Member/Non-member: \$20

# of Tickets \_\_\_\_\_ \$ \_\_\_\_\_

**90 Health for All Think Tank hosted by the Health Equity and Access Division**

Monday, July 25, 2022 • AACC Member/Non-member: \$25

# of Tickets \_\_\_\_\_ \$ \_\_\_\_\_

**92 Annual LVD Division Poster Reception, Dinner Lecture, and Awards Recognition**

Monday, July 25, 2022 • AACC Member/Non-member: \$50

# of Tickets \_\_\_\_\_ \$ \_\_\_\_\_

**96 Nutrition Division Symposium**

Monday, July 25, 2022 • AACC Member/Non-member: \$20

# of Tickets \_\_\_\_\_ \$ \_\_\_\_\_

**93 Clinical Translational Science Division Lunch and Learn**

Tuesday, July 26, 2022 • AACC Member/Non-member: \$15

# of Tickets \_\_\_\_\_ \$ \_\_\_\_\_

**94 Mass Spectacular**

Tuesday, July 26, 2022 • AACC Member/Non-member: \$10

# of Tickets \_\_\_\_\_ \$ \_\_\_\_\_

**98 AACC Academy Annual Membership Meeting + Awards Luncheon**

Wednesday, July 27, 2022 • AACC Member/Non-member: \$45

# of Tickets \_\_\_\_\_ \$ \_\_\_\_\_

**99 20th Annual Point-of-Care Coordinators Forum**

Thursday, July 28, 2022 • AACC Member/Non-member: \$20

# of Tickets \_\_\_\_\_ \$ \_\_\_\_\_

Total # of Special Events \_\_\_\_\_ Total \$ \_\_\_\_\_

REGISTRANT'S NAME \_\_\_\_\_

**VII. SESSION RECORDINGS**

**Session Recordings 12751**

The 2022 AACC Annual Scientific Meeting will be recorded. Access to the streaming content is available for purchase as an 11-month subscription that will commence in August 30, 2022 and close July 31, 2023. The content is made available as streaming content only and is not available for download. Session recordings include audio and presentation slides from most of the scientific sessions. Roundtables will not be recorded. If purchased, the cost for session recordings is \$199, by 1:00 p.m. CDT on July 28, 2022. After that, the price is \$299. The recording will be available on August 30, 2022. AACC members purchasing an All Access registration (full conference) will get access to the session recordings included at no extra charge.

**VIII. PAYMENT INFORMATION**

**Membership Dues** Section III  
 Join AACC (Professional membership \$244) \$ \_\_\_\_\_

**Renew AACC Membership**

- Renew AACC membership (and current options)\*
- Renew my membership (and current membership options)\*  
 if my current membership expires before July 28, 2022.

\*Amount charged will depend on your current member options.

Conference Fees Section IV \$ \_\_\_\_\_

Guest/Spouse Fees Section IV \$ \_\_\_\_\_

AACC University Section VA \$ \_\_\_\_\_

Roundtable Sessions Section VB \$ \_\_\_\_\_

Special Events Section VI \$ \_\_\_\_\_

Conference Recording Section VII \$ \_\_\_\_\_

**Total Payment Enclosed:** \$ \_\_\_\_\_

*In the event that the total amount due is miscalculated on this form, we will automatically recalculate your registration fees and you will be charged accordingly.*



Convention Data Services (CDS) is the only authorized registration vendor for the 2022 AACC Annual Scientific Meeting & Clinical Lab Expo. If you are contacted by any company other than CDS regarding registration, please note that these companies are not authorized to represent AACC nor do they have access to registration.

**Please submit all 4 pages of this form.**

- ONLINE** meeting.aacc.org  
(Credit card payments only)
- MAIL** AACC Customer Service  
900 Seventh Street, NW, Suite 400  
Washington, DC 20001
- FAX** +1.508.743.3639 (Credit card payments only).  
Fax copy will be considered original. To avoid duplication, do not mail original.  
*Credit card information cannot be accepted via email due to security protocols.*

You will receive an email confirmation letter within two weeks of receipt of your registration form with complete payment. All registrants may view and print a copy of their confirmation letter by logging into our website at [meeting.aacc.org](http://meeting.aacc.org).

U.S. badges will **NOT** be sent by mail. All individuals must show a government issued photo ID in order to pick up their badges and tickets.

**Deadline: Early registration ends June 9, 2022.**

**Full payment must accompany all orders. Purchase orders are not accepted.**

- Check enclosed  
(payable to AACC, in U.S. dollars, through a U.S. bank only)
- Company check  Personal check
- Wire transfer date sent \_\_\_\_\_ Sending bank \_\_\_\_\_

Contact AACC Customer Service at [custserv@aacc.org](mailto:custserv@aacc.org) for ACH and wire transfer information. (Please fax or mail registration form)

**Credit Card:**  VISA  MasterCard  American Express

Card number \_\_\_\_\_

Expiration date (MM/YY) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Cardholder's name \_\_\_\_\_

Billing address EXACTLY as it appears on your credit card statement  
 \_\_\_\_\_  
 \_\_\_\_\_

**Cancellation Policy:** All Conference cancellations and transfers must be received in writing. Written cancellation requests received through July 7, 2022, will be assessed a \$50 processing fee. If a Conference registrant is unable to attend, the registration may be transferred to another person or converted to the Digital Pass option through July 7, 2022. A \$50 processing fee will be assessed to convert to the Digital Pass. No refunds, transfers, or conversions to Digital Pass will be granted after July 7, 2022.

For AACC USE ONLY: Date Received \_\_\_\_\_ Check # \_\_\_\_\_ Check Amount \_\_\_\_\_