



2018 TRANSPLANT NURSING SYMPOSIUM REGISTRATION FORM

28–30 September 2018 • Hilton Rosemont O'Hare
Chicago, IL, USA

FOR OFFICE USE ONLY

Customer # _____ Mtg Ord # 1- _____

Date _____ | _____

Please type or print clearly. Use a separate form for each registrant.

Full name _____ First name for badge _____ Credentials _____

Facility _____ Facility city/state _____

Preferred address (home office) _____ City/state/ZIP/country _____

Contact information listed here will be included in the attendee registration list distributed at the meeting. You may opt to have your contact information removed from this list in Box C below.

Home phone _____ Office phone _____ Fax _____

E-mail (home office) _____

E-mail address required. Registration confirmation is sent only via e-mail.

Emergency contact name _____ Day phone _____ Evening phone _____

(fta) Check here if this will be your first Transplant Nursing Symposium. If you belong to an ITNS Chapter, write your chapter name here: _____

To register, make your selections in the boxes below, add the subtotals, and indicate the total amount in box G.

<p>A Full Conference and Presymposium Registration</p> <table border="0"> <tr> <td></td> <td style="text-align: center;">Rate on or before 29 Aug</td> <td style="text-align: center;">Rate after 29 Aug</td> </tr> <tr> <td>Full Symposium Registration (28–30 Sept)</td> <td></td> <td></td> </tr> <tr> <td>Member Full</td> <td><input type="checkbox"/> \$400 USD</td> <td><input type="checkbox"/> \$500 USD</td> </tr> <tr> <td>Nonmember Registration</td> <td><input type="checkbox"/> \$570 USD</td> <td><input type="checkbox"/> \$670 USD</td> </tr> <tr> <td>Nonmember Join and Register</td> <td></td> <td></td> </tr> <tr> <td>Active RN</td> <td><input type="checkbox"/> \$520 USD</td> <td><input type="checkbox"/> \$620 USD</td> </tr> <tr> <td>Retired RN</td> <td><input type="checkbox"/> \$495 USD</td> <td><input type="checkbox"/> \$595 USD</td> </tr> <tr> <td>Associate</td> <td><input type="checkbox"/> \$470 USD</td> <td><input type="checkbox"/> \$570 USD</td> </tr> <tr> <td>Emerging Countries</td> <td><input type="checkbox"/> \$430 USD</td> <td><input type="checkbox"/> \$530 USD</td> </tr> <tr> <td>Presymposium Session (28 Sept, 16:00–19:00)</td> <td></td> <td></td> </tr> <tr> <td>3 hour</td> <td><input type="checkbox"/> \$60 USD</td> <td><input type="checkbox"/> \$60 USD</td> </tr> <tr> <td>Presymposium Session (28 Sept, 15:00–19:00)</td> <td></td> <td></td> </tr> <tr> <td>4 hour</td> <td><input type="checkbox"/> \$75 USD</td> <td><input type="checkbox"/> \$75 USD</td> </tr> <tr> <td colspan="3" style="text-align: right;">Subtotal A \$ _____</td> </tr> </table>		Rate on or before 29 Aug	Rate after 29 Aug	Full Symposium Registration (28–30 Sept)			Member Full	<input type="checkbox"/> \$400 USD	<input type="checkbox"/> \$500 USD	Nonmember Registration	<input type="checkbox"/> \$570 USD	<input type="checkbox"/> \$670 USD	Nonmember Join and Register			Active RN	<input type="checkbox"/> \$520 USD	<input type="checkbox"/> \$620 USD	Retired RN	<input type="checkbox"/> \$495 USD	<input type="checkbox"/> \$595 USD	Associate	<input type="checkbox"/> \$470 USD	<input type="checkbox"/> \$570 USD	Emerging Countries	<input type="checkbox"/> \$430 USD	<input type="checkbox"/> \$530 USD	Presymposium Session (28 Sept, 16:00–19:00)			3 hour	<input type="checkbox"/> \$60 USD	<input type="checkbox"/> \$60 USD	Presymposium Session (28 Sept, 15:00–19:00)			4 hour	<input type="checkbox"/> \$75 USD	<input type="checkbox"/> \$75 USD	Subtotal A \$ _____			<p>D Session Selection (Enter numerical session codes in boxes. Session codes and the full schedule can be found at ITNS.org/AnnualSymposium.)</p> <p>Saturday, 29 Sept</p> <table border="0"> <tr> <td>09:45–10:05</td> <td><input type="text"/></td> <td>10:40–11:00</td> <td><input type="text"/></td> <td>11:05–11:25</td> <td><input type="text"/></td> </tr> <tr> <td>14:10–14:30</td> <td><input type="text"/></td> <td>14:35–14:55</td> <td><input type="text"/></td> <td>15:35–15:55</td> <td><input type="text"/></td> </tr> <tr> <td>16:00–16:20</td> <td><input type="text"/></td> <td>16:25–16:45</td> <td><input type="text"/></td> <td>16:50–17:10</td> <td><input type="text"/></td> </tr> <tr> <td>17:15–17:35</td> <td><input type="text"/></td> <td>17:40–18:00</td> <td><input type="text"/></td> <td></td> <td></td> </tr> </table> <p>Sunday, 30 Sept</p> <table border="0"> <tr> <td>09:10–09:30</td> <td><input type="text"/></td> <td>09:35–09:55</td> <td><input type="text"/></td> <td>10:20–10:40</td> <td><input type="text"/></td> </tr> <tr> <td>10:45–11:05</td> <td><input type="text"/></td> <td>11:10–11:30</td> <td><input type="text"/></td> <td>11:40–12:10</td> <td><input type="text"/></td> </tr> </table>	09:45–10:05	<input type="text"/>	10:40–11:00	<input type="text"/>	11:05–11:25	<input type="text"/>	14:10–14:30	<input type="text"/>	14:35–14:55	<input type="text"/>	15:35–15:55	<input type="text"/>	16:00–16:20	<input type="text"/>	16:25–16:45	<input type="text"/>	16:50–17:10	<input type="text"/>	17:15–17:35	<input type="text"/>	17:40–18:00	<input type="text"/>			09:10–09:30	<input type="text"/>	09:35–09:55	<input type="text"/>	10:20–10:40	<input type="text"/>	10:45–11:05	<input type="text"/>	11:10–11:30	<input type="text"/>	11:40–12:10	<input type="text"/>
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<p>B 1-Day Symposium Registration (For registrants attending 1 day of the meeting only)</p> <p>Please select the day you will attend and the appropriate rate.</p> <p>_____ Saturday _____ Sunday</p> <table border="0"> <tr> <td></td> <td style="text-align: center;">Rate on or before 29 Aug</td> <td style="text-align: center;">Rate after 29 Aug</td> </tr> <tr> <td>Member Register & Join</td> <td><input type="checkbox"/> \$300 USD</td> <td><input type="checkbox"/> \$400 USD</td> </tr> <tr> <td>Active RN</td> <td><input type="checkbox"/> \$420 USD</td> <td><input type="checkbox"/> \$520 USD</td> </tr> <tr> <td>Retired RN</td> <td><input type="checkbox"/> \$395 USD</td> <td><input type="checkbox"/> \$495 USD</td> </tr> <tr> <td>Associate</td> <td><input type="checkbox"/> \$370 USD</td> <td><input type="checkbox"/> \$470 USD</td> </tr> <tr> <td>Emerging Countries</td> <td><input type="checkbox"/> \$330 USD</td> <td><input type="checkbox"/> \$430 USD</td> </tr> <tr> <td colspan="3" style="text-align: right;">Subtotal B \$ _____</td> </tr> </table>		Rate on or before 29 Aug	Rate after 29 Aug	Member Register & Join	<input type="checkbox"/> \$300 USD	<input type="checkbox"/> \$400 USD	Active RN	<input type="checkbox"/> \$420 USD	<input type="checkbox"/> \$520 USD	Retired RN	<input type="checkbox"/> \$395 USD	<input type="checkbox"/> \$495 USD	Associate	<input type="checkbox"/> \$370 USD	<input type="checkbox"/> \$470 USD	Emerging Countries	<input type="checkbox"/> \$330 USD	<input type="checkbox"/> \$430 USD	Subtotal B \$ _____			<p>E Additional Options</p> <p>Friday, 28 Sept</p> <p><input type="checkbox"/> 11:00–15:00 Hospital Tour</p> <p style="text-align: right;">Subtotal E \$ _____</p>																																																									
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<p>C Special Requests</p> <p><input type="checkbox"/> I will need a vegetarian meal. (SDV) <input type="checkbox"/> I will need a kosher meal. (SDK)</p> <p><input type="checkbox"/> I do not wish to have my name and contact information included in the onsite attendee list. (DIS) <input type="checkbox"/> I have other needs. Please contact me. (OTH)</p>	<p>F ITNS Foundation</p> <p>Contribute to the ITNS Foundation.</p> <p style="text-align: right;">Subtotal F \$ _____</p>																																																																														
<p>G Total</p> <p>Be sure to complete all boxes.</p> <p style="text-align: right;">(A or B) + E + F = \$ _____</p>																																																																															

4 EASY WAYS TO REGISTER

Payment MasterCard Visa American Express Discover Check (enclosed)

- Make check payable to ITNS.
- A charge of \$75 USD will apply to checks returned for insufficient funds.
- If rebilling of a credit card charge is necessary, a \$75 USD processing fee will be charged.
- I authorize ITNS to charge the above listed credit card amounts reasonably deemed by ITNS to be accurate and appropriate.

ONLINE (Credit card payment only)
ITNS.org/AnnualSymposium

FAX (Credit card payment only)
847.375.6341

PHONE (Credit card payment only)
847.375.6340

MAIL TO: ITNS Transplant Nursing Symposium
Attn: Reg Dept.
PO Box 3781
Oak Brook, IL 60522 USA

Account number

Expiration date

Cardholder's name (Please print)

Signature

If payment does not accompany this form, your registration will not be processed. Full payment must be postmarked on or before 29 Aug 2018 to qualify for early-bird rates.

Cancellation Policy: All cancellations must be submitted in writing. A \$100 processing fee applies to all cancellations. No refunds will be made on cancellations postmarked after 5 Sept 2018. All refunds will be processed after the Transplant Nursing Symposium.