



2020 VIRTUAL ANNUAL MEETING

Live: October 22-25, 2020

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 B below.

Home phone _____ Office phone _____ Fax _____

E-mail (home office) _____

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

(fta) Check here if this will be your first Annual Meeting. 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 E.

<p>A Full Conference and Registration</p> <table border="0"> <tr> <td></td> <td style="text-align: center;">Rate on or before Oct. 7</td> <td style="text-align: center;">Rate after Oct. 8</td> </tr> <tr> <td colspan="3">Full Conference Registration (Oct 22–25)</td> </tr> <tr> <td>Member Full</td> <td><input type="checkbox"/> \$449 USD</td> <td><input type="checkbox"/> \$549 USD</td> </tr> <tr> <td>Emerging Countries Member Full</td> <td><input type="checkbox"/> \$249 USD</td> <td><input type="checkbox"/> \$349 USD</td> </tr> <tr> <td colspan="3">Nonmember Registration</td> </tr> <tr> <td></td> <td><input type="checkbox"/> \$569 USD</td> <td><input type="checkbox"/> \$669 USD</td> </tr> <tr> <td>Emerging Countries Nonmember Full</td> <td><input type="checkbox"/> \$369 USD</td> <td><input type="checkbox"/> \$469 USD</td> </tr> <tr> <td colspan="3">Nonmember Join and Register</td> </tr> <tr> <td>Active RN</td> <td><input type="checkbox"/> \$569 USD</td> <td><input type="checkbox"/> \$669 USD</td> </tr> <tr> <td>Retired RN</td> <td><input type="checkbox"/> \$544 USD</td> <td><input type="checkbox"/> \$644 USD</td> </tr> <tr> <td>Associate</td> <td><input type="checkbox"/> \$519 USD</td> <td><input type="checkbox"/> \$619 USD</td> </tr> <tr> <td>Emerging Countries</td> <td><input type="checkbox"/> \$314 USD</td> <td><input type="checkbox"/> \$414 USD</td> </tr> <tr> <td colspan="3">Pharmacology for Transplant Nurses (Oct 22, 7:00am–3:00pm CT)</td> </tr> <tr> <td>Member</td> <td><input type="checkbox"/> \$179 USD</td> <td></td> </tr> <tr> <td>Nonmember</td> <td><input type="checkbox"/> \$229 USD</td> <td></td> </tr> <tr> <td colspan="3">Immunology 101 (Oct 22, 11:00am–1:00pm CT)</td> </tr> <tr> <td>Member</td> <td><input type="checkbox"/> \$75 USD</td> <td></td> </tr> <tr> <td>Nonmember</td> <td><input type="checkbox"/> \$99 USD</td> <td></td> </tr> <tr> <td colspan="3">Leadership Preconference (Oct 22, 9:00–11:00am CT)</td> </tr> <tr> <td>Member</td> <td><input type="checkbox"/> \$75 USD</td> <td></td> </tr> <tr> <td>Nonmember</td> <td><input type="checkbox"/> \$99 USD</td> <td></td> </tr> <tr> <td colspan="2"></td> <td style="text-align: right;">Subtotal A \$ _____</td> </tr> </table>		Rate on or before Oct. 7	Rate after Oct. 8	Full Conference Registration (Oct 22–25)			Member Full	<input type="checkbox"/> \$449 USD	<input type="checkbox"/> \$549 USD	Emerging Countries Member Full	<input type="checkbox"/> \$249 USD	<input type="checkbox"/> \$349 USD	Nonmember Registration				<input type="checkbox"/> \$569 USD	<input type="checkbox"/> \$669 USD	Emerging Countries Nonmember Full	<input type="checkbox"/> \$369 USD	<input type="checkbox"/> \$469 USD	Nonmember Join and Register			Active RN	<input type="checkbox"/> \$569 USD	<input type="checkbox"/> \$669 USD	Retired RN	<input type="checkbox"/> \$544 USD	<input type="checkbox"/> \$644 USD	Associate	<input type="checkbox"/> \$519 USD	<input type="checkbox"/> \$619 USD	Emerging Countries	<input type="checkbox"/> \$314 USD	<input type="checkbox"/> \$414 USD	Pharmacology for Transplant Nurses (Oct 22, 7:00am–3:00pm CT)			Member	<input type="checkbox"/> \$179 USD		Nonmember	<input type="checkbox"/> \$229 USD		Immunology 101 (Oct 22, 11:00am–1:00pm CT)			Member	<input type="checkbox"/> \$75 USD		Nonmember	<input type="checkbox"/> \$99 USD		Leadership Preconference (Oct 22, 9:00–11:00am CT)			Member	<input type="checkbox"/> \$75 USD		Nonmember	<input type="checkbox"/> \$99 USD				Subtotal A \$ _____	<p>B Special Requests</p> <p><input type="checkbox"/> I do not wish to have my name and contact information included in the attendee list. (DIS)</p> <p><input type="checkbox"/> I have other needs. Please contact me. (OTH)</p> <hr/> <p>C Additional Options</p> <p>Thursday, Oct 22</p> <p><input type="checkbox"/> 12:00-1:00pm CT Opening Reception Sponsored by CareDX</p> <p>Friday, Oct 23 Oct</p> <p><input type="checkbox"/> 12:45-1:45 Symposium Sponsored by CareDX</p> <p>Saturday, Oct 24</p> <p><input type="checkbox"/> 1:10-2:10 CT Lunch Non-CE Symposium Sponsored by Natera</p> <p><i>All attendees are invited.</i></p> <hr/> <p>D ITNS Foundation</p> <p>Contribute to the ITNS Foundation.</p> <p style="text-align: right;">Subtotal D \$ _____</p>
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<p>E Total</p> <p><i>Be sure to complete all boxes.</i></p> <p style="text-align: right;">A + D = \$ _____</p>																																																																			

4 EASY WAYS TO REGISTER

Payment MasterCard Visa American Express Discover Check (enclosed)

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

FAX (Credit card payment only)
847.375.6341

PHONE (Credit card payment only)
847.375.6340

MAIL TO: ITNS Annual Meeting
Attn: Reg Dept.
PO Box 3781
Oak Brook, IL 60522 USA

- 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.

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 16 Oct 2020 to qualify for early-bird rates.

Conference Cancellation Policy: All cancellation requests must be made in writing. A \$100 processing fee will be charged for all cancellations postmarked on or before October 1, 2020. No refunds will be made under any circumstances on cancellations postmarked after that date. ITNS reserves the right make necessary Annual Meeting educational session adjustments at its sole discretion. If ITNS must cancel the entire meeting, registrants will receive a full refund for their paid registration fee.