

Facility Registration Form

Host Site Registration Fees: *(All fees are per audioconference.)*

	Single Audioconference	8+ Audioconferences
Institutional Member	\$330	\$315
Institutional Nonmember	\$380	\$365

Best Rate!

To take advantage of the package savings, you must register for all of your audioconference selections at the same time. Payment is due in advance.

Register my facility as a host site for the following 2009 Audioconferences: *(check all that apply)**

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> 094569 January 7 | <input type="checkbox"/> 094578 April 1 | <input type="checkbox"/> 094587 June 24 | <input type="checkbox"/> 094596 September 23 |
| <input type="checkbox"/> 094570 January 14 | <input type="checkbox"/> 094579 April 15 | <input type="checkbox"/> 094588 July 22 | <input type="checkbox"/> 094597 September 30 |
| <input type="checkbox"/> 094571 February 4 | <input type="checkbox"/> 094580 April 29 | <input type="checkbox"/> 094589 July 29 | <input type="checkbox"/> 094598 October 7 |
| <input type="checkbox"/> 094572 February 11 | <input type="checkbox"/> 094581 May 6 | <input type="checkbox"/> 094590 August 5 | <input type="checkbox"/> 094599 October 14 |
| <input type="checkbox"/> 094573 February 25 | <input type="checkbox"/> 094582 May 13 | <input type="checkbox"/> 094591 August 12 | <input type="checkbox"/> 094600 November 4 |
| <input type="checkbox"/> 094574 March 4 | <input type="checkbox"/> 094583 May 20 | <input type="checkbox"/> 094592 August 19 | <input type="checkbox"/> 094601 November 18 |
| <input type="checkbox"/> 094575 March 11 | <input type="checkbox"/> 094584 June 3 | <input type="checkbox"/> 094593 September 2 | <input type="checkbox"/> 094602 December 9 |
| <input type="checkbox"/> 094576 March 18 | <input type="checkbox"/> 094585 June 10 | <input type="checkbox"/> 094594 September 9 | <input type="checkbox"/> 094603 December 16 |
| <input type="checkbox"/> 094577 March 25 | <input type="checkbox"/> 094586 June 17 | <input type="checkbox"/> 094595 September 16 | <input type="checkbox"/> Other _____ |

**The audioconferences listed in this pamphlet are subject to change based on faculty availability and schedules.*

(please include program number and date of audioconference)

Please provide the following information: *(All fields are required)*

Facility Name: _____

Site Coordinator *(Individual name)*: _____

Site Coordinator's Title: _____

Shipping Address: _____
(No P.O. Boxes)

City/State/Zip: _____

Phone: _____ Fax: _____

E-mail: _____

AABB Institutional Membership Number*: _____

**If you are an Institutional Nonmember, please e-mail education@aabb.org for an identification number.*

All host site materials and instructions will be provided via e-mail.

Method of Payment:

Total Payment: _____ ***(Full payment must accompany registration form.)***

Check Enclosed *(Payable to AABB and in US currency)*

VISA/MasterCard Diners Club Discover American Express

Credit Card #: _____ Exp. Date: _____

Signature: _____ Name as printed on card: _____

Source Code *(in yellow box on mailing panel)*: _____

Register Now!

3 Easy Ways to Register:

Online:

www.aabb.org

>Meetings and Events

>Audioconferences

By Fax:

+1.301.907.6895

By Mail:

AABB Education Department

8101 Glenbrook Road

Bethesda, MD 20814-2749 USA

Registration Updates

Visit www.aabb.org

>Meetings and Events

>Audioconferences

Questions?

Contact the AABB Education

Department at +1.301.215.6482 or

education@aabb.org.

Cancellation Policy

All cancellations must be made in writing and sent to education@aabb.org. Cancellations received by AABB at least two weeks prior to a program will receive a full refund less a \$75 administrative fee. There will be no refunds for cancellations within two weeks of an audioconference.



Advancing Transfusion and
Cellular Therapies Worldwide