



Association for the  
Advancement of  
Blood & Biotherapies

## Ways To Register

BY EMAIL: eLearning@aabb.org  
BY FAX: +1.301.215.6533  
BY MAIL: AABB eLearning  
P.O. Box 791251  
Baltimore, MD 21279 USA

Questions? Email eLearning@aabb.org  
Call +1.301.215.6482

# Foundations of Cell Therapy Course Institutional Registration Form

Please complete all sections of this registration form. Incomplete forms may delay processing. Individual registration is available on the [AABB Store](#).

## I. Institution Information (all fields are required)

Facility Name			
Street Address			
Street Address 2			
City			
State/Province		Zip	
Country (if other than USA)			
AABB Institutional Identification Number			

## II. Primary Contact Information

Name	
Email	
Phone	

## III. Payment Information

(Full payment must accompany registration form)

Total Number of Learners	
Total Amount	\$
<input type="radio"/> Check Enclosed (payable to AABB and in US currency)	
<input type="radio"/> Visa/MasterCard <input type="radio"/> Diners Club <input type="radio"/> Discover <input type="radio"/> American Express	
Credit Card #	
Expiration Date	
Name on Card	
Billing Address	
Billing Address Cont'd	
Signature	

## REGISTRATION FEES

Institutional Member	\$295
Institutional Nonmember	\$345
Bulk AABB Premium Corporate Partner*	\$236/person
Bulk Institutional Member*	\$251/person
Bulk Institutional Nonmember*	\$293/person

**\*Bulk Discount:** a 15% discount (20% for AABB Premium Corporate Partners) is included for purchases of 4 or more learner registrations at the same time. Per person price is reflective of the applicable discount. The price per learner will be determined by the institution's AABB membership status. A **minimum of four (4) registrations must be included.**

## CANCELLATION POLICY

All cancellations must be sent to [eLearning@aabb.org](mailto:eLearning@aabb.org). Cancellations received before the learner accesses the program will receive a full refund. There will be no refunds for cancellations after the program has been accessed.

## IV. Learner Information

Provide first name, last name and email address for the learner(s) you have purchased the program for. AABB will create an account for each learner and they will receive an email notification with instructions to access the AABB Education Platform at <http://education.aabb.org>. All learner accounts will be set up under the Facility Name and address provided on this form (unless they have an account already in our system).

If you have more than 10 learners, please provide the following information for each learner in an excel file and email with this registration form to [eLearning@aabb.org](mailto:eLearning@aabb.org). All fields are required.

First Name	Last Name	Email

Thank you for your order. A payment confirmation will be provided via email within 2-5 business days.