



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

## Leadership Certificate in Blood Banking and Transfusion Medicine Low/Lower-Middle-Income Resident INSTITUTIONAL Registration Form

Please complete all sections of this registration form. Incomplete forms may delay processing. See Page 2 for discount qualifications and instructions.

### I. Institution Information (required fields are indicated by \*)

Facility Name*			
Address Line 1*			
Address Line 2			
Town/City			
Province/Region		Zip/Postal Code	
COUNTRY*			
AABB Institutional Identification Number			

### II. Primary Contact Information

Name*	
Email*	
Phone	

### III. Payment Information

(Full payment must accompany registration form)

Total Number of Learners		Residency Discount	<input type="radio"/> Low <input type="radio"/> Lower-Middle
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

(Price is per person)

	Premium Corp Partner	Member	Nonmember
<b>Low-Income</b>			
Resident	N/A	\$352	\$464
Bulk Institutional*	\$282	\$299	\$394
<b>Lower-Middle-Income</b>			
Resident	N/A	\$527	\$695
Bulk Institutional*	\$422	\$448	\$591

**\*Bulk Discount:** a 15% discount (20% for AABB Premium Corporate Partners) is included for purchases of 4 or more registrations. Per person price noted above is reflective of the applicable discount. The price per learner will be determined by the institution's AABB membership status and residency (see page 2 for additional requirements/documentation). **A minimum of four (4) registrations must be included.**

### 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 that also meets the residency requirements - see Page 2 for details).

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. 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.

## Leadership Certificate in Blood Banking and Transfusion Medicine Low/Lower-Middle-Income Resident INSTITUTIONAL Registration Form Page 2

### How to Qualify

Only facilities/organizations operating in countries defined as Low-Income or Lower-Middle-Income Economies by the World Bank are eligible for the applicable discounted registration fee. Eligible countries are based on those defined as [Low-Income](#) and [Lower-Middle-Income](#) Economies by the World Bank. Please visit the World Bank website to view the current list of qualifying [Low-Income](#) and [Lower-Middle-Income](#) countries (appears at the bottom of the page).

Supporting documentation must be submitted and verified by AABB (see “Registration Instructions” below). If the documentation does not meet requirements for the Low-Income or Lower-Middle-Income developing country discount, AABB reserves the right to change the registration to the appropriate fee and registration will not be confirmed until the balance is paid. No other discounts may be applied.

Participation in this special discount program is not automatically guaranteed or renewed each year.

### Registration Instructions

Complete this form and submit with payment. Proof of employment and residency must be included for each learner listed on the registration form. In addition, proof of residency of the facility/institution must also be included. **No exemptions to these stipulations will be made.**

### Cancellation Policy

All cancellations must be made in writing and sent to eLearning@aabb.org. Cancellations received before the learner(s) accesses the program will receive a full refund. There will be no refunds for cancellations after the program has been accessed.

### Questions

Contact the AABB eLearning team via email at eLearning@aabb.org. A response should be expected Monday – Friday during business hours (US Eastern Standard Time or EST) within 48 hours of request.