

# 2013 AAB Annual Meeting & Educational Conference Registration Form

Name (type or print) \_\_\_\_\_ AAB/AMS I.D. # \_\_\_\_\_  
 Lab/Facility \_\_\_\_\_ Mailing Address:  Home  Work  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Telephone # (\_\_\_\_\_) \_\_\_\_\_ Fax # (\_\_\_\_\_) \_\_\_\_\_  
 Email \_\_\_\_\_

*Please print name(s) as they should appear on nametag(s)* Your Name \_\_\_\_\_  
 Spouse/Guest \_\_\_\_\_ Children \_\_\_\_\_

**HOW TO REGISTER**

- **Online** with a credit card at [www.aab.org](http://www.aab.org).
- **Telephone:** call (314)241-1445 with credit card information.
- **Fax:** fill out the registration form with credit card information and dial, (314)241-1449.
- **Mail:** fill out the registration form and mail with applicable payment to: AAB 2012 Conference, 906 Olive, Suite 1200, St. Louis, MO 63101-1448.

**CANCELLATION POLICY:** Fees will be refunded in full for cancellations received at least four (4) weeks prior to the Conference. Cancellations received more than ten (10) days and less than four (4) weeks prior to the Conference will be subject to a \$50 charge. No refund will be made for cancellations received less than 10 days prior to the Conference. However, substitutions may be made at anytime. Refunds will not be processed until after the Conference.

**Payment Method**  Enclosed is my check, payable to AAB. Please charge my  MC  VISA  AMEX  Discover

Credit Card # \_\_\_\_\_ Expiration Date \_\_\_\_/\_\_\_\_ CVC \_\_\_\_\_  
Card Verification Code

\_\_\_\_\_ Print name as it appears on card \_\_\_\_\_ Cardholder's signature

Register by May 2 and SAVE \$80 off Full Conference Registration.	On or Before May 2		After May 2	
	Member	Non-Member	Member	Non-Member
<b>Check one:</b> I am primarily interested in: <input type="checkbox"/> CRB <input type="checkbox"/> Technical <input type="checkbox"/> AAB/NILA (Management)				
<input type="checkbox"/> <b>Full Conference</b> (Thursday, May 16-Saturday, May 18) ..... <b>\$ 469</b> <small>Registration includes all lectures/handout materials for May 16-18, receptions on May 16 &amp; 17, three continental breakfasts, breaks, and two luncheons.</small>	\$ 539	\$ 549	\$ 619	\$ _____
<input type="checkbox"/> <b>Andrology Workshop</b>				
<input type="checkbox"/> <b>Workshop ONLY</b> ..... <b>\$ 269</b>	\$ 339	\$ 349	\$ 419	\$ _____
<input type="checkbox"/> <b>DISCOUNTED Workshop (Save \$40):</b> Register for the Full Conference AND receive \$40 off the Workshop price ..... <b>\$ 229</b>	\$ 299	\$ 309	\$ 379	\$ _____
Two identical workshops are available. Please indicate the session you wish to attend. <input type="checkbox"/> #1 - Wed., May 15, Morning <input type="checkbox"/> #2 - Wed., May 15, Afternoon				
<input type="checkbox"/> <b>Daily Registration.</b> Please check day(s) attending.				
<input type="checkbox"/> <b>Thursday, May 16</b> ..... <b>\$ 199</b> <small>Registration includes all lectures/handout materials for May 16, reception, continental breakfast, breaks, and lunch.</small>	\$ 229	\$ 249	\$ 279	\$ _____
<input type="checkbox"/> <b>Friday, May 17</b> ..... <b>\$ 299</b> <small>Registration includes all lectures/handout materials for May 17, poster session/reception, continental breakfast, breaks and lunch.</small>	\$ 344	\$ 349	\$ 394	\$ _____
<input type="checkbox"/> <b>Saturday, May 18</b> ..... <b>\$ 140</b> <small>Registration includes all lectures/handout materials for May 18, continental breakfast and break.</small>	\$ 160	\$ 190	\$ 210	\$ _____
<input type="checkbox"/> <b>Guest Registration</b> ..... <b>\$ 195</b> <small>Includes receptions on May 16 &amp; 17, 3 continental breakfasts, and 2 luncheons.</small>	\$ 195	\$ 205	\$ 205	\$ _____
<input type="checkbox"/> <b>Youth Registration</b> (12 and under) ..... <b>\$ 50</b> <small>Includes all of those items listed under Guest except that lunches will be selected from a child's menu.</small>	\$ 50	\$ 55	\$ 55	\$ _____
<input type="checkbox"/> <b>Individual Tickets</b>				
<input type="checkbox"/> <b>Welcoming Reception</b> (Thursday, May 16) ..... \$ 60	\$ 60	\$ 65	\$ 65	\$ _____
<input type="checkbox"/> <b>Reception - Poster Session included</b> (Friday, May 17) ..... \$ 60	\$ 60	\$ 65	\$ 65	\$ _____
<input type="checkbox"/> <b>Continental Breakfast</b>				
<input type="checkbox"/> Thursday, May 16 ..... \$ 18	\$ 18	\$ 18	\$ 18	\$ _____
<input type="checkbox"/> Friday, May 17 ..... \$ 18	\$ 18	\$ 18	\$ 18	\$ _____
<input type="checkbox"/> Saturday, May 18 ..... \$ 18	\$ 18	\$ 18	\$ 18	\$ _____
<input type="checkbox"/> <b>Lunch</b> - Indicate lunch entree under "Lunch Selection."				
<input type="checkbox"/> <b>Networking Luncheon</b> - Thursday, May 16 ..... \$ 40	\$ 40	\$ 45	\$ 45	\$ _____
<input type="checkbox"/> <b>Awards Luncheon</b> - Friday, May 17 ..... \$ 50	\$ 50	\$ 55	\$ 55	\$ _____
<b>Lunch Selection</b> - Indicate the entree for each luncheon you/guest will attend. <small>Applies to Full, Daily Thursday/Friday, and Guest registrations.</small> <b>Thursday:</b> ___ Chicken Parmesan ___ Fettucini Alfredo with Shrimp ___ Vegetarian Option <b>Friday:</b> ___ Petite Filet Mignon ___ Pesto Seared Salmon ___ Vegetarian Option				
<input type="checkbox"/> <b>Conference Program Book Sponsor</b> , please print the following message: ..... \$ 30	\$ 30	\$ 30	\$ 30	\$ _____
<b>TOTAL ENCLOSED</b>			<b>\$</b>	