

# Meeting Registration Form

## 45th ASHP Midyear Clinical Meeting & Exhibition

December 5–9, 2010 • Anaheim Convention Center • Anaheim, California

**Register in advance and SAVE!** Pre-meeting registration closes on November 22nd and rates increase up to \$100 for onsite registration. All mail, fax, and online registrations must be received by ASHP on or before November 22nd to take advantage of discounts.

### REGISTRATION INFORMATION

Please type or print clearly.

ASHP ID Number: \_\_\_\_\_

Name: \_\_\_\_\_  
FIRST MIDDLE LAST

Title: \_\_\_\_\_

Name for Badge: \_\_\_\_\_

Home Address: \_\_\_\_\_  
STREET

CITY STATE ZIP

Employer/School (required): \_\_\_\_\_

Employer/School Address: \_\_\_\_\_  
STREET

CITY STATE ZIP

Daytime Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail (necessary for meeting confirmation): \_\_\_\_\_

Check here if this is a new address.

**What is your primary position?  
(please check one)**

- A Director
- B Associate or Assistant Director
- C Clinical Coordinator
- D Other Supervisory Position
- E Staff Pharmacist
- F Clinical Pharmacist-General
- G Clinical Pharmacist-Specialist
- H Faculty
- I Student
- J Resident
- K Technician
- L Other: \_\_\_\_\_

Customize your experience. Take advantage of pre-meeting workshops and special events. Complete both sides of this form, then check the meeting website [www.ashp.org/meetings/midyear](http://www.ashp.org/meetings/midyear) to plan your days.

### METHOD OF PAYMENT

Charge to:  MasterCard  VISA  AmEx  Discover

TOTAL (from other side) \$ \_\_\_\_\_

MCM10PA

Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

*By authorizing this charge, I certify that the above registration information is true and correct, and agree to be responsible for any additional charges incurred pursuant to this meeting registration.*

Check or money order payable to ASHP attached.  
*Checks must be drawn on a U.S. bank in U.S. funds.*

Purchase order #: \_\_\_\_\_ attached.  
*Please issue invoice.*

### FOUR WAYS TO REGISTER

**ONLINE**  
[www.ashp.org/meetings/midyear](http://www.ashp.org/meetings/midyear) (It's the quick and easy way to go!)

**CALL TOLL-FREE 1-866-279-0681**, Mon.–Fri. 8 a.m.–6 p.m. EST  
International: **001-301-664-8700**

**FAX** registration form to **1-301-657-1251**

**MAIL** registration form with check or money order payable to ASHP.  
*Checks must be drawn on a U.S. bank in U.S. funds.*

**Midyear Clinical Meeting Registration**  
**ASHP Payment Center**  
**P.O. Box 17693**  
**Baltimore, MD 21297**

### ARRANGEMENTS FOR SPECIAL ASSISTANCE

If you have any disability for which you may require an auxiliary aid or special service while attending this meeting, please contact Krystal Stotz at ASHP, 301-664-8602 by November 12, 2010.

**Please Note:** Payments to ASHP are not deductible as charitable contributions for federal income tax purposes. However, they may be deductible under other provisions of the Internal Revenue Code. Only additional donations to the ASHP Research and Education Foundation are tax deductible.

## MIDYEAR CLINICAL MEETING

Registration includes meeting sessions, exhibits, Wednesday Evening Party, and the Thursday networking luncheon. Please check one.

	ASHP Member	Non-member	
<input type="checkbox"/> <b>Full Registration Fee</b>			
Advance Registration (on or before October 20)	FM <input type="checkbox"/> \$505	FN <input type="checkbox"/> \$805*	\$ _____
Regular Registration (October 21–November 22)	FM <input type="checkbox"/> \$555	FN <input type="checkbox"/> \$855*	\$ _____
On-site Registration (after November 22)	FM <input type="checkbox"/> \$605	FN <input type="checkbox"/> \$905*	\$ _____
<input type="checkbox"/> <b>Resident Fee</b> (Pharmacy residents in ASHP- or CSHP-accredited programs)	RM <input type="checkbox"/> \$300	RN <input type="checkbox"/> \$400*	\$ _____
<input type="checkbox"/> <b>Pharmacy Technician Fee</b>	TM <input type="checkbox"/> \$300	TN <input type="checkbox"/> \$400*	\$ _____
<input type="checkbox"/> <b>Student Fee</b> (Full-time undergraduate or postgraduate pharmacy students)	SM <input type="checkbox"/> \$225	SN <input type="checkbox"/> \$300*	\$ _____
<b>Graduation date required to qualify for student fees:</b> _____			
<input type="checkbox"/> <b>Retired Fee</b>	FR <input type="checkbox"/> \$300	FR <input type="checkbox"/> \$400*	\$ _____

### \*BONUS MEMBERSHIP FOR ALL NON-MEMBERS

All full non-member meeting registrants automatically become members of ASHP for 6 months! Membership includes *AJHP*<sup>®</sup>, *Intersections*, *Newslink*, Section membership, CE, discounts on future meetings, pharmacy publications and software, and much more!

Take full advantage of your membership by enrolling in a Section. There is no additional cost. Choose from the Sections here and select one Primary Section where you can vote for Section Leadership.

Students are automatically enrolled in the ASHP Pharmacy Student Forum. New Practitioners and Residents are automatically enrolled in the New Practitioners Forum. All are encouraged to enroll in a Section as well.

Please check here if you prefer not to take advantage of this offer.

Primary <i>(select one)</i>	Additional <i>(no limit)</i>
<input type="checkbox"/> Home, Ambulatory, and Chronic Care Practitioners	<input type="checkbox"/>
<input type="checkbox"/> Clinical Specialists and Scientists	<input type="checkbox"/>
<input type="checkbox"/> Pharmacy Practice Managers	<input type="checkbox"/>
<input type="checkbox"/> Inpatient Care Practitioners	<input type="checkbox"/>
<input type="checkbox"/> Pharmacy Informatics and Technology	<input type="checkbox"/>

### PRE-MEETING WORKSHOPS

You must register by November 22nd and be a full Midyear Meeting registrant to attend pre-meeting workshops. PharmPrep registration is also available on-site.

<b>01WK</b>	<b>Residency Learning System (RLS)</b> —Saturday, December 4, 8:00 a.m. – 5:00 p.m. Registration is limited. Select only <b>one</b> of the following options:		
	01WKA <input type="checkbox"/> <b>RLS A: PGY1 New Programs</b> (60 participants)	<input type="checkbox"/> \$210	\$ _____
	01WKB <input type="checkbox"/> <b>RLS B: PGY1 Existing Programs</b> (120 participants)	<input type="checkbox"/> \$210	\$ _____
	01WKC <input type="checkbox"/> <b>RLS C: PGY2 New and Existing Programs</b> (60 participants)	<input type="checkbox"/> \$210	\$ _____
<b>02WK</b>	<b>ASHP's PharmPrep Live! A Board Review Workshop</b> —Saturday, December 4, 8:30 a.m. – 5:00 p.m. Registration is limited. Free 15 month access to PharmPrep Online is included in your registration.	<input type="checkbox"/> \$60 (\$75 on-site)	\$ _____
<b>03WK</b>	<b>A Pain and Palliative Case Study: A Journey Across the Continuum of Care</b> Sunday, December 5, 8:30 a.m. – 4:30 p.m. Registration is limited to 60 participants.	<input type="checkbox"/> \$210	\$ _____
<b>04WK</b>	<b>Clinical Leaders Boot Camp: Practical Tools for Promoting and Establishing New Services</b> Sunday, December 5, 8:30 a.m. – 4:30 p.m. Registration is limited to 60 participants.	<input type="checkbox"/> \$210	\$ _____
<b>05WK</b>	<b>Managing Anticoagulation Therapy: An Advanced Workshop for Pharmacists 2010</b> Sunday, December 5, 8:30 a.m. – 4:30 p.m. Registration is limited to 60 participants.	<input type="checkbox"/> \$210	\$ _____
<b>06WK</b>	<b>Basic Statistics: A Non-Threatening Approach to the Use of Statistics in Clinical Trials</b> Sunday, December 5, 8:00 a.m. – 5:00 p.m. Registration is limited to 35 participants.	<input type="checkbox"/> \$210	\$ _____

### SPECIAL EVENTS

<input type="checkbox"/> <b>Wednesday Evening Party</b> <i>(Included in all registration fees and one-day Wed/Thu)</i>	<input type="checkbox"/> \$25 x _____ tickets	\$ _____
<input type="checkbox"/> <b>Thursday Networking Luncheon</b> <i>(Included in all registration fees except one-day)</i>	<input type="checkbox"/> \$35 x _____ tickets	\$ _____
<input type="checkbox"/> Additional tax-deductible donation to the ASHP Research and Education Foundation		\$ _____

### ONE-DAY REGISTRATION FEES

Please indicate which day(s) you will be attending *(includes meeting sessions and exhibits only)*.

- Sunday   
  Monday   
  Tuesday   
  Wednesday and Thursday  
 OM One Day, **Member** \$255/day   
  ON One Day, **Non-member** \$355/day

**TOTAL FEES**    \$ \_\_\_\_\_