

Please complete a separate form for each attendee.

\_\_\_\_\_  
 Dr Mr Ms Name

\_\_\_\_\_  
 Credential(s)

\_\_\_\_\_  
 Title

\_\_\_\_\_  
 Organization

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 City State/ZIP

\_\_\_\_\_  
 Phone

\_\_\_\_\_  
 Fax

\_\_\_\_\_  
 Email (required for registration confirmation)

\_\_\_\_\_  
 RN Number (required for contact hours)

**Register via credit card by faxing this form to 703.836.2090.**

VISA  MasterCard  AMEX

\_\_\_\_\_  
 Card Number

/

\_\_\_\_\_  
 Expiration Date CVV Billing Zip

\_\_\_\_\_  
 Card Holder Name

\_\_\_\_\_  
 Signature

**Register by mailing a Check made payable to ASCA Foundation with this form to**

**ASCA Foundation  
 1012 Cameron St  
 Alexandria, VA 22314-2427**

\_\_\_\_\_  
 Name on Check

\_\_\_\_\_  
 Check Number

**Cancellation Policy:** All cancellation requests must be submitted via the Online Refund Request Form located at [www.ascassociation.org/ASCA2015/registrationcancellation](http://www.ascassociation.org/ASCA2015/registrationcancellation). Through April 3, refunds are given minus a \$50 administrative fee. From April 4 through April 30, refunds will be given minus a \$150 administrative fee. **No refunds will be given after May 1.** If someone from your group registration must cancel, the refund will be made on the lowest registration fee paid by any member of the group, minus the administrative fees as outlined above. Please note that no refunds are issued for the pre-meeting workshops or tickets purchased.

**Standard Registration Received After April 3<sup>rd</sup>**

<input type="checkbox"/> Full Price	<b>\$1,005</b>	\$ _____
<input type="checkbox"/> ASC Supporter Member Discount	<b>\$895</b>	\$ _____
<input type="checkbox"/> Facility Member Discount*		
1st Attendee	<b>\$895</b>	\$ _____
2nd Attendee	<b>\$795</b>	\$ _____
3rd+ Attendee	<b>\$695</b>	\$ _____

**Early Registration Received Through April 3<sup>rd</sup>**

<input type="checkbox"/> Full Price	<b>\$905</b>	\$ _____
<input type="checkbox"/> ASC Supporter Member Discount	<b>\$795</b>	\$ _____
<input type="checkbox"/> Facility Member Discount*		
1st Attendee	<b>\$795</b>	\$ _____
2nd Attendee	<b>\$695</b>	\$ _____
3rd+ Attendee	<b>\$595</b>	\$ _____

\***ASCA Facility Members** sending more than one attendee from the **same location** are eligible for a discount when registering at the **same time**. Please submit a separate registration for each attendee.

Guest\* **\$150** \$ \_\_\_\_\_

\_\_\_\_\_  
 Guest Name

**+Guest Policy:** Guest registration is reserved for spouses/guests of the registrant who are not involved in the ASC industry in any way. Guests cannot attend educational sessions and are ineligible for continuing education credits. This fee allows the guest full access to the Exhibit Hall, including Wednesday and Thursday night receptions, continental breakfasts, lunch on Thursday, Friday's Celebration Luncheon and the Social Event.

**Pre-Meeting Workshops**

All Workshops are Wednesday, May 13.

	<b>Member</b>	<b>Full Price</b>	
<input type="checkbox"/> CASC Review Course	\$395	\$625	\$ _____
<input type="checkbox"/> A CMS/Life Safety Code® Survival Guide	\$175	\$295	\$ _____
<input type="checkbox"/> ICD-10 for Administrators	\$175	\$295	\$ _____
<input type="checkbox"/> Preparing for AAAHC Accreditation	\$175	\$295	\$ _____
<input type="checkbox"/> Preparing for Joint Commission Accreditation	\$175	\$295	\$ _____
<input type="checkbox"/> Sterilization: Standards and Recommended Practices	\$175	\$295	\$ _____

**Purchase Session Recordings**

Package includes all available breakout sessions.

	<b>Member</b>	<b>Full Price</b>	
<input type="checkbox"/> Entire Conference Package Download	\$125	\$175	\$ _____

**Grand Total: \$**