

Registration Form

Badge Information and Mailing Address



American College of Nurse-Midwives

61st Annual Meeting & Exhibition

Albuquerque, New Mexico | May 21-26, 2016

ACNM MEMBERSHIP NUMBER		PRACTICE/INSTITUTION/EDUCATION PROGRAM		
NAME		CREDENTIALS		
STREET ADDRESS				
CITY	STATE	POSTAL CODE	COUNTRY	
PHONE	FAX	E-MAIL		

Registration Fees

Registration Type	Early Bird <i>by March 7, 2015</i>	Advance <i>March 8–May 16, 2015</i>	On-Site <i>After May 16, 2015</i>
<input type="checkbox"/> Active Member*	<input type="checkbox"/> \$475	<input type="checkbox"/> \$560	<input type="checkbox"/> \$650
<input type="checkbox"/> Active– Advancing Member*	<input type="checkbox"/> \$370	<input type="checkbox"/> \$415	<input type="checkbox"/> \$425
<input type="checkbox"/> Active– New Midwife Member*	<input type="checkbox"/> \$320	<input type="checkbox"/> \$365	<input type="checkbox"/> \$375
<input type="checkbox"/> Active Supporting Member	<input type="checkbox"/> \$400	<input type="checkbox"/> \$485	<input type="checkbox"/> \$530
<input type="checkbox"/> Associate Member (Friend)	<input type="checkbox"/> \$400	<input type="checkbox"/> \$485	<input type="checkbox"/> \$530
<input type="checkbox"/> Student**	<input type="checkbox"/> \$275	<input type="checkbox"/> \$320	<input type="checkbox"/> \$330
<input type="checkbox"/> Non-Member	<input type="checkbox"/> \$695	<input type="checkbox"/> \$780	<input type="checkbox"/> \$925
<input type="checkbox"/> Non-Member Student**	<input type="checkbox"/> \$375	<input type="checkbox"/> \$420	<input type="checkbox"/> \$430
<input type="checkbox"/> One-Day Registration Member***	<input type="checkbox"/> \$220	<input type="checkbox"/> \$220	<input type="checkbox"/> \$220
<input type="checkbox"/> One-Day Registration Non-Member***	<input type="checkbox"/> \$240	<input type="checkbox"/> \$240	<input type="checkbox"/> \$240

*You must provide your ACNM member number. **A valid student ID may be requested at registration on-site. ***Two-Day Maximum

For one day registrations, please select the day(s): Mon Tue Wed Thur

Workshops

Regular Rate: Full Day \$250 • Half Day \$150

Student Rate: Full Day \$125 • Half Day \$75

Special Rates May Apply

Tickets are assigned on a first-come, first-served basis. Refer to the Workshop listing on the meeting website at www.midwife.org/AM2016-WorkshopAndEdSessions for full descriptions and special rates. Please list your first and second choices.

1. _____

2. _____

ACNM makes financial obligations based on the number of tickets sold, we cannot refund tickets unless the workshop is cancelled. In the event of a workshop cancellation, ACNM will reassign you to another workshop of your choice at an equal value or issue a refund.

Annual Meeting Registration Fees Include:

- Access to sessions (opening, premier, and education sessions)
- Access to research and general poster sessions
- Access to the exhibition including daily meal
- Post-meeting online access to educational sessions and materials and CEU print-on-demand certificates
- Meeting materials and bag
- Coffee breaks
- Midwifery Celebration After Party

Register Online at www.midwife.org/am

or mail your registration with payment to

ACNM 2016
P.O. Box 758898; Baltimore, MD 21275-8896

Questions? E-mail: annualmeeting@acnm.org
Phone: 240-485-1800

CANCELLATION AND REFUND POLICY

A \$50 cancellation fee will be assessed for all registration cancellations received on or before Monday, March 7th. Between Tuesday, March 8th and Monday, May 16th, a fee of 50% of the registration fee will be assessed. After Monday, May 16th, no cancellation refunds will be granted, except for extenuating circumstances (i.e. accident, illness, etc.) and must include appropriate verification. Fees paid for optional tickets, guest tickets and workshops are non-refundable. In the event of a workshop cancellation, ACNM will reassign attendees to another workshop at an equal value or issue a refund. Please access the ACNM website at www.midwife.org/am for detailed information on the meeting policies.

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Optional Tickets

- ___ x \$35 = \$ _____ Division of Global Health Reception, *Wednesday, May 25 • 4:30-6:30pm*
- ___ x \$50 = \$ _____ Midwives of Color Reception, *Sunday, May 22 • 7:00-9:00pm*
- ___ x \$25 = \$ _____ Midwives of Color Reception **Student Ticket**,
Sunday, May 22 • 7:00-9:00pm
- ___ x \$60 = \$ _____ A.C.N.M. Foundation Fundraiser, *Tuesday, May 24 • 8:00-10:00pm*
- ___ x \$30 = \$ _____ A.C.N.M. Foundation Fundraiser **Student Ticket**,
Tuesday, May 24 • 8:00-10:00pm
- ___ x \$50 = \$ _____ Midwives-PAC Rally **Members/Guest Ticket**,
Monday, May 23 • 7:30-9:00pm
- ___ x \$20 = \$ _____ Midwives-PAC Rally **Student Ticket**, *Monday, May 23 • 7:30-9:00pm*
- ___ x \$40 = \$ _____ **Reserve Your Seat** for the Midwifery Awards Dinner
(3 course meal dinner service) *Wednesday, May 25 • 7:00-12:00 midnight*
- ___ x \$75 = \$ _____ **Reserve Your Seat** for the Midwifery Awards Dinner Guest Ticket,
(3 course meal dinner service) *Wednesday, May 25 • 7:00-12:00 midnight*
- ___ x \$0 = \$ _____ Attend Midwifery Celebration After Party Only (no dinner),
Wednesday, May 25 • 9:00-12:00 midnight
- ___ x \$0 = \$ _____ Complimentary Exhibit Hall Access (meals not included)
Guest Ticket
- ___ x \$18 = \$ _____ Complimentary Exhibit Hall Access including meals **Guest Ticket**
(daily fee) Monday Tuesday Wednesday
- ___ x \$50 = \$ _____ Complimentary Exhibit Hall Access with meals
3-day bundle **Guest Ticket**

Privacy Policy

In accordance with privacy legislation, we will not share your personal information with third parties, such as Annual Meeting sponsors without your prior consent. Indicate below if you wish to receive promotional materials from ACNM's 2016 Annual Meeting sponsors as a result of your registration for this meeting. If you select "Opt In", ACNM will communicate your details to Annual Meeting sponsors and you will receive promotional pieces related to the Annual Meeting either prior to and/or immediately after the meeting.

Opt In **Opt Out**

Payment

Total Registration Fees (from page 1)	
Total Workshop Fees (from page 1)	
Total Optional Tickets	
GRAND TOTAL	

I have read and agree to ACNM's Cancellation and Refund Policy

Payment Type **Check** **Credit Card:** Visa MC Discover AmEx

Payment can be made by check or credit card. Checks should be made payable to ACNM and must be in U.S. dollars drawn on a U.S. bank.

CREDIT CARD NUMBER

EXPIRATION DATE

SECURITY CODE

PRINT NAME ON CARD

SIGNATURE