



INACSL Virtual Conference 2021

Registration Form

Note, please only fill out this form if paying by check. To pay with a credit card please register online at <https://www.inacsl.org/education/annual-conference-2021/>

Name _____

Credentials _____

Organization _____

Address _____

City _____

State _____

Country _____

Zip _____

Phone _____

INACSL VIRTUAL CONFERENCE 2021 RATES

Registration Type	Full 30+ CNE	Partial CNE 10 CNE
INACSL Member	\$499	\$249
Non Member	\$599	\$349

1. Is this your first time attending the INACSL Annual Conference?

- Yes No

2. How did you hear about the conference?

- Email from INACSL Email from a sponsor/partner
- Friend/colleague INACSL Website
- Facebook Twitter
- Other _____

3. What is your primary reason for attending the INACSL Annual Conference?

- Educational Sessions Exhibit Hall Networking Opportunities

4. What discipline do you work in?

- Allied Health Professional (i.e. RT, PT, OT)
- Corporate, Professional
- EMT/Paraprofessional/First Responder
- Pharmacist
- Physician/Physician Assistant
- RN/NP/CRN/Midwife
- Other _____

5. What is your primary position/job function?

- Educator/Faculty Researcher Practitioner
- Assistant Dean/Associate Dean/Dean Director Manager
- Student Vendor Other _____

6. How will you pay to attend the conference?

- Employer pays for entire registration
- Employer pays for portion of registration
- I pay for my registration (not self-employed)
- I pay for my registration (self-employed)
- Other _____
- If you have any special needs, accommodations or requirements pursuant with *the Americans with Disability Act (ADA)* please describe here. A member of the INACSL team will reach out to you regarding your request. _____
- DO NOT** include my contact information on the attendee list provided to other attendees allowing them to contact me pre, post and during the event via email and/or mail. All attendees must adhere to the *INACSL Privacy Policy*.
- Some of our exhibitors send special event offers, private invitations and information to attendees pre- and/or post-event via email and/or mail. Please check here if you DO NOT wish to receive any of these communications.

CANCELLATION BY INDIVIDUAL

Because all sessions will be available for on-demand viewing, only in the case of loss of employment, death in the family or other extenuating circumstances will a refund be issued. To request a refund, you must contact INACSL at registration@inacsl.org with documentation of your reason for cancellation by May 1, 2021. All cancellation requests will be reviewed by INACSL, and if approved, will be processed within 2 weeks of the original request.

- I understand and agree to the Cancellation by Individual policy.

CANCELLATION BY INACSL

If for any reason beyond INACSL's control INACSL determines that the INACSL Conference must be cancelled, shortened, delayed, dates changed, or otherwise altered or changed, Participant understands and agrees that INACSL shall not refund the registration fees paid and that all losses and damages that Participants may suffer as a consequence thereof are their responsibility and not that of INACSL or its directors, officers, employees, agents or subcontractors. Participants understand that it may lose all monies it has paid to INACSL for participation in the Conference, as well as other costs and expenses it has incurred, including travel, lodging, etc.

- I understand and agree to the Cancellation by INACSL policy.

The INACSL Registration Terms & Conditions apply to the 2021 Annual Meeting. Prior to your registration, you must acknowledge and accept the Terms & Conditions. Should you not wish to accept the Terms & Conditions you should not register. Submission of a registration is regarded as affirmation of your acceptance of the Terms & Conditions.

- I understand and agree to the Terms & Conditions.

Complete this registration form and return with payment to:

INACSL
330 N. Wabash Suite 2000
Chicago, IL 60611

QUESTIONS?

Please email us at registration@inacsl.org