

For Office Use Only	
Cust # _____	Mtg Ord # 1- _____
Date _____	I _____

APHON 45th Annual Conference and Exhibit: Virtual Experience • October 28-30, 2021

Please print clearly. Use a separate form for each registrant; duplicate as necessary.

Complete name _____ First name for badge _____ BMTCN®
 CPON®
 CPHON®

Facility _____ Member ID No. _____

Mailing address (Home Work) _____

City/State/ZIP _____ Your first APHON conference? Yes (FTA) No

E-mail* (Home Work) _____

*E-mail address required. Confirmation of registration is sent only via e-mail.

Work phone (____) _____ Fax (____) _____ Home phone (____) _____

Emergency contact name _____ Daytime phone (____) _____ Evening phone (____) _____

For New Members Please do not publish my name in the member directory. I do not want my name provided as part of APHON's mailing list.

To register, make your selections in the boxes below, add the subtotals, and indicate the total amount in box D.

<p>Full Conference Registration October 28-30, 2021</p> <table border="0"> <thead> <tr> <th></th> <th>On or before 7/30/2021</th> <th>On or before 9/17/2021</th> <th>On or after 9/18/2021</th> </tr> </thead> <tbody> <tr> <td>APHON Full or Associate Member</td> <td><input type="checkbox"/> \$395</td> <td><input type="checkbox"/> \$490</td> <td><input type="checkbox"/> \$565</td> </tr> <tr> <td>APHON Member Undergraduate Student*</td> <td><input type="checkbox"/> \$100</td> <td><input type="checkbox"/> \$175</td> <td><input type="checkbox"/> \$250</td> </tr> <tr> <td>APHON Member Advanced-Level Student*</td> <td><input type="checkbox"/> \$250</td> <td><input type="checkbox"/> \$325</td> <td><input type="checkbox"/> \$400</td> </tr> <tr> <td>Nonmember</td> <td><input type="checkbox"/> \$520</td> <td><input type="checkbox"/> \$595</td> <td><input type="checkbox"/> \$670</td> </tr> <tr> <td>Nonmember Student*</td> <td><input type="checkbox"/> \$370</td> <td><input type="checkbox"/> \$445</td> <td><input type="checkbox"/> \$520</td> </tr> <tr> <td>Poster hall access only</td> <td><input type="checkbox"/> \$275</td> <td><input type="checkbox"/> \$350</td> <td><input type="checkbox"/> \$425</td> </tr> </tbody> </table> <p>Multiple Member Discount** Please download the team member discount registration form to apply at the discounted rate.</p>		On or before 7/30/2021	On or before 9/17/2021	On or after 9/18/2021	APHON Full or Associate Member	<input type="checkbox"/> \$395	<input type="checkbox"/> \$490	<input type="checkbox"/> \$565	APHON Member Undergraduate Student*	<input type="checkbox"/> \$100	<input type="checkbox"/> \$175	<input type="checkbox"/> \$250	APHON Member Advanced-Level Student*	<input type="checkbox"/> \$250	<input type="checkbox"/> \$325	<input type="checkbox"/> \$400	Nonmember	<input type="checkbox"/> \$520	<input type="checkbox"/> \$595	<input type="checkbox"/> \$670	Nonmember Student*	<input type="checkbox"/> \$370	<input type="checkbox"/> \$445	<input type="checkbox"/> \$520	Poster hall access only	<input type="checkbox"/> \$275	<input type="checkbox"/> \$350	<input type="checkbox"/> \$425	<p>A Special Requests</p> <p>(SA) <input type="checkbox"/> I will require special assistance. Please contact me. (DIS) <input type="checkbox"/> I do not wish to have my name and contact information included in the onsite attendee list.</p>
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<p>Total Amount (from Box A) \$ _____</p>																													
<p>B Optional Events</p> <p>Non-CNE Jazz Dinner Symposium (SYM1) <input type="checkbox"/> no cost Wednesday, October 27, 6-7:15 pm</p> <p>Non-CNE Chiesi Breakfast Symposium (SYM2) <input type="checkbox"/> no cost Thursday, October 28, 6:45-8 am</p> <p>Non-CNE Jazz Lunch Symposium (SYM3) <input type="checkbox"/> no cost Thursday, October 28, 11:45 am-1 pm</p> <p>Career Development Event (CDE) <input type="checkbox"/> no cost Thursday, October 28, 1-1:45 pm</p> <p>Local Chapter Strategies: Shared Experiences to Shared Success (LCM) <input type="checkbox"/> no cost Friday, October 29, 7:30-8:45 am</p> <p>Annual Business Meeting and Awards Lunch (BUS) <input type="checkbox"/> no cost Friday, October 29, 12:45-2:15 pm</p> <p>Non-CNE Genentech Dinner Symposium (SYM4) <input type="checkbox"/> no cost Friday, October 29, 5-6:15 pm</p> <p>Non-CNE Y-mAbs Breakfast Symposium (SYM5) <input type="checkbox"/> no cost Saturday, October 30, 7:30-8:45 am</p> <p>CNE MediCom Worldwide Lunch Symposium (SYM6) <input type="checkbox"/> no cost Saturday, October 30, 12:45-2 pm</p>	<p>D Payment (must accompany registration)</p> <p><input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> DISCOVER</p> <p>*\$25 will be charged for rebilling a credit card charge. •In the event of a miscalculation, I authorize APHON to charge to my credit card an amount APHON reasonably deems to be accurate.</p> <p><input type="checkbox"/> Check (enclosed) •Make check payable to Association of Pediatric Hematology/Oncology Nurses. •Checks not in U.S. funds will be returned. •A charge of \$25 will apply to checks returned for insufficient funds.</p> <p>Ck # _____</p> <p>Account number _____ Expiration date _____</p> <p>Signature _____ Cardholder's name (please print) _____</p> <p>4 easy ways to register</p> <p>Online conference.aphon.org (credit card payment only) Phone 855.202.9760 (toll-free, U.S. residents only; credit card payment only); 847.375.4724 (credit card payment only)</p> <p>Mail APHON Conference PO Box 3781 Oak Brook, IL 60522 Fax 847.375.6478 (credit card payment only). If you fax this form, please do not mail the original.</p>																												

Payment must accompany registration. If your facility is sending a check, it is your responsibility to confirm that APHON has received payment prior to your arrival at the conference.
Cancellation Policy: All cancellations must be submitted in writing to the APHON Member Services Department. A \$100 processing fee will be charged for all cancellations postmarked on or before October 1, 2021. No refunds will be made under any circumstances on cancellations postmarked after October 1, 2021. APHON reserves the right to substitute faculty or to cancel or reschedule sessions due to low enrollment or other unforeseen circumstances. If APHON must cancel the entire meeting, registrants will receive a full credit or refund of their paid registration fee.

* Student Discount: Professional nursing students may register at a special rate, which is available to full-time undergraduate students, APHON National Student Nurses' Association (NSNA) members, and full-time advanced-level students. Documented proof of full-time student status (e.g., faculty letter, course load listing) is required with registration.
 ** A discounted rate is available to groups of two or more APHON members from the same facility. All the registration forms must arrive together, or the discount will not apply. Visit conference.aphon.org for more details and to register as a team.