

REGISTRATION FORM

November 15-19, 2023
Ernest N. Morial Convention Center
New Orleans, LA

#aapmr23

NEW ORLEANS, LA & VIRTUAL
NOVEMBER 15-19, 2023

ATTENDEE REGISTRATION

For more information, visit www.aapmr.org/2023.

I understand that by completing and submitting this registration form, I am entering into a legal agreement, which binds me to the terms of this agreement. I READ this registration form, including AAPM&R's cancellation and refund policies incorporated herein, and understand its terms.

AAPM&R MEMBER ID#		NPI# (NATIONAL PROVIDER IDENTIFIER)	
FIRST NAME/GIVEN NAME	M.I.	LAST NAME/SURNAME	DEGREES
BADGE NAME		INSTITUTION OR COMPANY	
MAILING ADDRESS			
CITY	STATE/PROVINCE	ZIP CODE	COUNTRY
PHONE (INCLUDE AREA CODE)	EXTENSION	MOBILE PHONE (INCLUDE AREA CODE)	EMAIL ADDRESS

NON-ATTENDEE GUEST REGISTRATION

See Registration Fee information on page 2 of this form.

FIRST NAME/GIVEN NAME	M.I.	LAST NAME/SURNAME
CITY	STATE/PROVINCE	COUNTRY



CHECK IF YOU OR YOUR GUEST REQUIRE SPECIAL ASSISTANCE.
AAPM&R WILL CONTACT YOU TO DISCUSS YOUR SPECIFIC NEEDS.



CHECK IF YOU OR YOUR GUEST HAVE SPECIAL DIETARY NEEDS.
AAPM&R WILL CONTACT YOU TO DISCUSS YOUR SPECIFIC NEEDS.

In case of an emergency onsite, contact: (REQUIRED BY ALL ATTENDEES. PLEASE PRINT CLEARLY.)

NAME:	RELATION:
PHONE:	ALTERNATE PHONE:

* ALL FIELDS ARE REQUIRED TO BE COMPLETED.

METHOD OF PAYMENT

REGISTRATIONS WILL NOT BE PROCESSED OR CONFIRMED WITHOUT PAYMENT MADE IN FULL.
PAYMENT MUST BE MADE IN U.S. DOLLARS AND ACCOMPANY THIS REGISTRATION FORM.

ENCLOSED IS CHECK # CHECKS MUST BE IN U.S. FUNDS AND MADE PAYABLE TO AAPM&R.
CHARGE TO THE FOLLOWING: Visa MasterCard Discover American Express
CARD NUMBER

EXPIRATION DATE

/

By signing below, I accept the charges I have indicated on this form. I have read and fully understand the cancellation and refund policies incorporated into this registration form.

NAME (PLEASE PRINT NAME AS IT APPEARS ON CARD)

SIGNATURE (REQUIRED FOR CREDIT CARD PAYMENT)

PAYMENT INFORMATION

SUBMIT YOUR REGISTRATION AND PAYMENT

FAX ALL PAGES OF THIS FORM TO: (847) 563-4191

Faxed registration must include CREDIT CARD PAYMENT information.
Visa, MasterCard, Discover or American Express ONLY.

MAIL THIS FORM AND PAYMENT TO:

AAPM&R Annual Assembly Registration
P.O. Box 95528
Chicago, IL 60694-5528

NOTE: Mail sent to the P.O. Box can take up to 2 weeks to process.

Registration form must be postmarked or faxed to the Academy by **October 18, 2023**. After this date, you may register online at www.aapmr.org/2023 or onsite.

EU and UK Residents can learn more about the personal data we process, our purposes for processing their personal data, and their data privacy rights by viewing our **Privacy Notice** for EU/UK residents, a copy of which is at the following URL: <http://www.aapmr.org/privacy-policy/privacy-policy-eu-uk>. Non-EU/UK residents can learn more about how we process their personal data at the following URL: <http://www.aapmr.org/privacy-policy>

REGISTRATION FEES AND DEADLINES

All cancellations for the Annual Assembly and preconference courses must be submitted in writing via email to registration@aapmr.org or via mail postmarked by October 18, 2023, to the address below. Cancellations submitted before October 18 will receive a refund of all fees paid, minus a \$150 processing fee and processed 7-14 days after notification is received. **Cancellations submitted after October 18 or over the phone will not be accepted.**

Full Registration for In-Person and Virtual Only categories include the following events. Please visit aapmr.org/2023 for complete details:

	IN-PERSON + VIRTUAL	VIRTUAL ONLY
Annual Assembly	<ul style="list-style-type: none"> All Plenary and Symposia sessions Job and Fellowship Fair Access to the PM&R Pavilion (Research Hub, Learning Center, Career Corner) Skills Labs (additional fees apply) Welcome Reception and PM&R Party: On the Field of the Superdome PHIT Fest Attendee lunches 	<ul style="list-style-type: none"> All Plenary Sessions 36 live-streamed Symposia Research Hub with Poster Wall including pre-recorded presentations
AA Rewind (Post-Assembly)	All recorded educational sessions (100+ CME)	All recorded educational sessions (100+ CME)

MEMBER FEES	Early-Bird Registration Now Through September 13	Standard/Onsite Registration September 14 - Onsite	FEES
Physiatrist (Fellow/Part-Time Fellow, Associate, International)	\$850	\$1,050	\$
Early-Career (Practice and Fellowship Pathways)	\$525	\$625	\$
Resident	\$425	\$525	\$
Advanced Practice Provider	\$675	\$875	\$
Medical Student (Full Conference)	\$150	\$275	\$
Senior Member/Past President	FREE	FREE	Complimentary
Member Fees Total			\$

NONMEMBER FEES	Early-Bird Registration Now Through September	Standard/Onsite Registration September 14 - Onsite	FEES
Physiatrist/Physician	\$1,150	\$1,350	\$
Resident	\$525	\$625	\$
Advanced Practice Provider	\$875	\$1,075	\$
Medical Student (Full Conference)	\$225	\$375	\$
Non-Physician Practice/Hospital Administrator	\$875	\$1,075	\$
Industry Representative	\$1,150	\$1,350	\$
Nonmember Fees Total			\$
PAGE 2 TOTAL			\$

REGISTRATION FEES AND DEADLINES

GUEST AND CHILD FEES (In-person attendance option only)

Guest Registration (age 21+)* Includes entry to the Job and Fellowship Fair, Welcome Reception, PM&R Pavilion, and Sunday brunch featuring PhyszTalks. Registration does not include complimentary lunch in the PM&R Pavilion. Please wear badges at all times.	\$95	\$
Child Registration (ages 0-20) Includes entry to the Welcome Reception, PM&R Pavilion, and Sunday brunch featuring PhyszTalks. Registration does not include complimentary lunch in the PM&R Pavilion.	FREE	Complimentary
*Co-workers, or those associated within the psychiatry industry, do not qualify for a Non-Attendee Guest Badge. These individuals must register in the appropriate professional or exhibitor category.		Non-Attendee Guest Fees Total
		\$

EVENTS (In-person attendance option only)

PM&R Party: On the Field of the Superdome		Friday, November 17	Number of Tickets	FEES
PM&R Party: On the Field of the Superdome 7-10 pm (CT)	Attendee		\$55	\$
	Non-Attendee Guest		\$55	\$
	Children (5 and under)		FREE	Complimentary
Foundation for PM&R Rehab 5K Run/Walk & Roll		Friday, November 17 6:30 am (CT)		
		Early-Bird Registration Now Through September 13	Standard/Onsite Registration September 14 - Onsite	
Member/Nonmember		\$25	\$35	\$
Resident		\$15	\$25	\$
2023 Job and Fellowship Fair	Ernest N. Morial Convention Center	Wednesday, November 15	6:30-9 pm (CT)	Complimentary
Events Total				\$

PRECONFERENCE COURSES (In-person attendance option only)

Registration fee includes light breakfast items, beverage breaks and boxed lunch.	Early-Bird Registration Now Through September 13	Standard/Onsite Registration September 14 - Onsite	FEES
STEP One: Ultrasound Clinical Applications of the Extremities Course	November 14-15		
Member Pricing	\$1,250	\$1,350	\$
Nonmember Pricing	\$1,395	\$1,495	\$
STEP Two: Concussion and Mild TBI Live Course*	November 14-15		
Member Pricing	\$2,500	\$2,500	\$
Nonmember Pricing	\$3,500	\$3,500	\$
Preconference Courses Total			\$
PAGE 3 TOTAL			\$

* This course is a required component of AAPM&R's STEP Concussion and Mild TBI Certificate Program. You must be enrolled in the AAPM&R STEP Concussion Certificate Program and have completed STEP pre-requisite components to attend this course. Visit aapmr.org/step more information.

AAPM&R MEMBERS SAVE BIG ON ANNUAL ASSEMBLY REGISTRATION!

Become an Academy member and experience the many savings and benefits of the AAPM&R community! Go to www.aapmr.org to download a membership application today, or call (847) 737-6000 and a Customer Service Representative will be happy to assist you.

REGISTRATION FEES & DEADLINES

SKILLS LABS (In-person attendance option only)

Our Skills Labs are three-hour educational experiences, offering a blend of didactic and hands-on immersive learning. Skills Labs have a limited number of participants to ensure an intimate learning environment. Additional registration is required for these sessions; sign-up early to reserve your seat!

Please consult your Preliminary Program or www.aapmr.org/2023 for dates and times

	Member Rate	Nonmember Rate	FEE\$
1801. The Art of Treating Spasticity: Ultrasound Workshop A	\$200	\$280	\$
1802. Clinical Applications of Orthobiologics: A Hands-On Workshop A	\$200	\$280	\$
1803. Practical Applications in Adaptive Sports Medicine A	\$200	\$280	\$
1804. Resident Bootcamp 1 EC	\$35	\$150	\$
1805. Cervical and Thoracic Interventional Ultrasound Applications A	\$200	\$280	\$
1806. Resident Bootcamp 2 EC	\$35	\$150	\$
1807. Ultrasound Guided Denervation of Hip, Knee and Shoulder Pain A	\$200	\$280	\$
1808. Ultrasound-Guided Extremity Nerve Blocks with Alcohol and Botulinum Toxin Injections in Head and Neck Muscles for Spasticity Management A	\$200	\$280	\$
1809. A Pain in the Rear: Ultrasound Evaluation of Chronic Gluteal Pain A	\$200	\$280	\$
1810. Ultrasound Evaluation of Peripheral Nerves A	\$200	\$280	\$

NOTE: Incomplete forms will delay the registration process. Please do not block or spam email from aapmr@prereg.net. If you don't receive a confirmation via email two weeks after submitting your form, check your junk/spam folder or call Customer Service at (847) 737-6000.

Method of Payment from page 1 must be completed, and submitted with all pages of this Registration Form.

A = All

EC = Early-Career

Skills Labs Total \$

Page 2 Total \$

Page 3 Total \$

GRAND TOTAL \$

2023 REGISTRATION FORM PARTICIPATION QUESTIONS

IN-PERSON PARTICIPANTS

Please select if you require special assistance. Yes No [If yes] Please explain your special assistance needs here:

Your Annual Assembly registration includes a complimentary boxed lunch Thursday, Friday and Saturday. Please indicate if you have special dietary requirements?

I do not have any dietary restrictions Vegan Gluten free Kosher Other/Additional comments:

FOR AAPM&R HOSTED CME ACTIVITIES: As a registrant of this activity, AAPM&R shares your name, institution, city and state with exhibitors/sponsors. Physical mailing addresses may be shared in the event an organization rents a list for one-time use for mailing purposes. You have the option to opt-out of this practice in accordance with [new ACCME guidelines](#) (2.3).

Note: Phone numbers and email addresses are not shared.

I provide my consent to having the information as described above shared with exhibitors and sponsors whose support makes this meeting possible.

I opt-out of having the information as described above with exhibitors and sponsors whose support makes this meeting possible.

FOR ANCILLARY ACTIVITIES AND EVENTS: I understand that if I allow my badge to be scanned by an exhibitor or sponsor, my name, company, address, and email address is made available to that exhibitor or sponsor whose support helps to make this meeting possible. This covers all corporate sponsored non-CME sessions. Attendees may choose not to attend sponsored ancillary events, thereby opting out of providing their information. View the [AAPM&R Policy on Information Sharing at Ancillary Activities and Events](#).

Note: Interacting in virtual spaces requires additional consent.

I understand and consent to the AAPM&R Policy on Information Sharing at Ancillary Activities and Events.

AAPM&R is pleased to offer childcare services in New Orleans. In partnership with KiddieCorp, AAPM&R will be offering subsidized rates to meeting registrants. Please select if you would like to receive additional information about childcare. Yes No

#PhysiatryDay will be happening on Friday, November 17. Help us #ThankAPhysiatrist by providing a shoutout to a mentor or peer who has helped you and your career!

VIRTUAL PARTICIPANTS

FOR AAPM&R HOSTED CME ACTIVITIES: As a registrant of this activity, AAPM&R shares your name, institution, city and state with exhibitors/sponsors. Physical mailing addresses may be shared in the event an organization rents a list for one-time use for mailing purposes. You have the option to opt-out of this practice in accordance with [new ACCME guidelines](#) (2.3).

Note: Phone numbers and email addresses are not shared.

I provide my consent to having the information as described above shared with exhibitors and sponsors whose support makes this meeting possible.

I opt-out of having the information as described above with exhibitors and sponsors whose support makes this meeting possible.

FOR ANCILLARY ACTIVITIES AND EVENTS: I understand that if I allow my badge to be scanned by an exhibitor or sponsor, my name, company, address, and email address is made available to that exhibitor or sponsor whose support helps to make this meeting possible. This covers all corporate sponsored non-CME sessions. Attendees may choose not to attend sponsored ancillary events, thereby opting out of providing their information. View the [AAPM&R Policy on Information Sharing at Ancillary Activities and Events](#).

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