

**TWO EASY WAYS  
TO REGISTER!**



**www.acmgmeeting.net**  
Payment by credit card only



**2019 ACMG Annual Meeting**  
7101 Wisconsin Ave., Suite 1101 • Bethesda, MD 20814  
Payment by credit card or check must be included with mailed registration forms.

## ATTENDEE INFORMATION (PLEASE PRINT)

FIRST NAME: \_\_\_\_\_ MI: \_\_\_\_\_ LAST NAME: \_\_\_\_\_ DEGREES/CREDENTIALS: \_\_\_\_\_  
 INSTITUTION: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE/PROVINCE: \_\_\_\_\_ ZIP/POSTAL CODE: \_\_\_\_\_ COUNTRY: \_\_\_\_\_  
 TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
 ATTENDEES EMAIL ADDRESS (REQUIRED): \_\_\_\_\_ CC OR BILLING EMAIL ADDRESS: \_\_\_\_\_  
(EMAIL ADDRESS REQUIRED – Confirmations and important information will be sent via email.) (CC for all registration correspondence)

**NOTE: All correspondence with registered attendees is via email.** To assure receipt of all important Annual Meeting related communications—please have your IT Department set your institutions' server (or set your email filter, spam blocker or server directly) to accept and not block emails from the following email addresses: **acmg2019@acmg.net**, **acmgmeeting@acmg.net**, **education@acmg.net**, **acmg@expoplanner.com** and **acmgsupport@cmrus.com**.

## REGISTRATION FEES

**ACMG MEMBERS:** To qualify for the membership rate, ACMG membership dues must be paid by January 31, 2019. Pending ACMG members must pay the non-member fee. The difference will be reimbursed when membership is approved.

	EARLY-BIRD On or before Jan. 4, 2019	ADVANCE DISCOUNT Jan. 5 – Feb. 19, 2019	LATE Feb. 20, 2019 through on-site	AMOUNT
<b>MD, PhD, Laboratory Director, DO, Commercial/Corporate Representative</b> . . . . .	<input type="checkbox"/> \$465	<input type="checkbox"/> \$565	<input type="checkbox"/> \$665	\$ _____
Mark registration category: <input type="radio"/> Genetic Counselor <input type="radio"/> Nurse <input type="radio"/> Physician Assistant <input type="radio"/> Dietitian . . . . .	<input type="checkbox"/> \$370	<input type="checkbox"/> \$420	<input type="checkbox"/> \$520	\$ _____
<input type="radio"/> Laboratory Technologist/Technician <input type="radio"/> Advocate Leader <input type="radio"/> Non-profit Advocacy Representative				
<b>Emeritus and Honorary</b> . . . . .	<input type="checkbox"/> \$75	<input type="checkbox"/> \$75	<input type="checkbox"/> \$110	\$ _____
<b>Trainee/Postdoctoral Fellow/Resident<sup>1</sup></b> . . . . .	<input type="checkbox"/> \$230	<input type="checkbox"/> \$280	<input type="checkbox"/> \$330	\$ _____
<b>Student (Medical School, Graduate School or Undergraduate Levels)<sup>2</sup></b> . . . . .	<input type="checkbox"/> \$100	<input type="checkbox"/> \$125	<input type="checkbox"/> \$150	\$ _____
<b>NON-MEMBERS:</b>				
<b>MD, PhD, Laboratory Director, DO, Commercial/ Corporate Representative</b> . . . . .	<input type="checkbox"/> \$790	<input type="checkbox"/> \$890	<input type="checkbox"/> \$990	\$ _____
Mark registration category: <input type="radio"/> Genetic Counselor <input type="radio"/> Nurse <input type="radio"/> Physician Assistant <input type="radio"/> Dietitian . . . . .	<input type="checkbox"/> \$585	<input type="checkbox"/> \$635	<input type="checkbox"/> \$735	\$ _____
<input type="radio"/> Laboratory Technologist/Technician <input type="radio"/> Advocate Leader <input type="radio"/> Non-profit Advocacy Representative				
<b>Trainee/Postdoctoral Fellow/Resident<sup>1</sup></b> . . . . .	<input type="checkbox"/> \$260	<input type="checkbox"/> \$310	<input type="checkbox"/> \$360	\$ _____
<b>Student (Medical School, Graduate School or Undergraduate Levels)<sup>2</sup></b> . . . . .	<input type="checkbox"/> \$100	<input type="checkbox"/> \$125	<input type="checkbox"/> \$150	\$ _____

**OTHER:**  
**Accompanying Person/Guest<sup>3</sup> (age 12+ only)** . . . . .  \$100  \$125  \$150 \$ \_\_\_\_\_  
 Guest Name #1: \_\_\_\_\_  
 Guest Name #2: \_\_\_\_\_

**One Day Registration:** (If you wish to register for more than one day, you must register in full) . . . . .  \$300  \$325  \$350 \$ \_\_\_\_\_  
**Select Day:**  Wednesday  Thursday  Friday  Saturday

**SIMD Attendees:** Registration fee to attend ACMG sessions, posters, exhibits and breaks . . . . .  \$250  \$250  \$250 \$ \_\_\_\_\_  
 on Friday, April 5 and ACMG morning concurrent sessions on Saturday, April 6.  
*Limited to those registered in full for the SIMD Meeting who are not attending the full ACMG Meeting.*

**Add the ACMG Live Conference Recordings to my Conference Registration** . . . . . \$ 99

Maximize your ACMG Annual Meeting experience with over 40 hours of recorded live content. Log in information will be provided to attendees purchasing the recordings after the meeting to access the audio/video fully synchronized to the onsite slide presentations available in streaming media format. These will be available post meeting at significantly higher prices. Short Courses will be made available for purchase post-meeting.

**TOTAL DUE: \$ \_\_\_\_\_**

**Please provide a printed Program Guide as part of my registration.**  Yes  No

(Content will also be available via the ACMG Mobile App, the ACMG Abstract Online Search and at [www.acmgmeeting.net](http://www.acmgmeeting.net). We appreciate your support of ACMG's sustainability initiatives.

*Continued on next page.*

<sup>1</sup> **Trainee/Postdoctoral Fellow/Resident:** Those qualifying for this registration fee must be enrolled in a postdoctoral training, residency or fellowship program in genetics or a related discipline. Please provide verification of this status when submitting the registration form to qualify for the discounted fee. Those who register onsite should bring a letter signed by their department head to certify current status.

<sup>2</sup> **Student Registration:** Those qualifying for this registration fee must be enrolled in medical school or an undergraduate or graduate program. Please provide verification of this status when submitting the registration form to qualify for the discounted fee. Those who register onsite should bring a student ID card or a letter signed by their department head to certify current status.

<sup>3</sup> **Accompanying Person/Guest Registration:** Spouses and/or other social guests (age 12+ only) of full meeting registrants are welcome. Professional attendees may not register as guests. The guest registration fee is required for all persons 12 or older who wish to attend the ACMG Opening Reception and access the Exhibit Hall. Guest registration DOES NOT allow access to sessions. Children are not permitted in educational sessions. Because of liability issues, children under 12 years of age are not permitted in the Exhibit Hall and cannot be registered as guests.

**The following sessions require separate registration and/or registration fees.**

Please check all that you plan to attend and include in the total registration fees.

**SHORT COURSES: Tuesday, April 2, 2019 • 12:30 pm – 5:30 pm**

- Short Course 1:** Skeletal Dysplasias Across the Human Lifespan
- Short Course 2:** NAMA at the ACMG 3.0
- Short Course 3:** Somatic Mutation Testing in Cancer: Implications for the Oncologist and Geneticist

	EARLY-BIRD On or before Jan. 4, 2019	ADVANCE DISCOUNT Jan. 5 – Feb. 19, 2019	LATE Feb. 20, 2019 through on-site	AMOUNT
ACMG Member Registration Fee with Full Registration . . . . .	<input type="checkbox"/> \$230	<input type="checkbox"/> \$285	<input type="checkbox"/> \$345	\$ _____
Non-Member Registration Fee with Full Registration . . . . .	<input type="checkbox"/> \$290	<input type="checkbox"/> \$350	<input type="checkbox"/> \$400	\$ _____
Member – Short Course Only . . . . .	<input type="checkbox"/> \$290	<input type="checkbox"/> \$350	<input type="checkbox"/> \$400	\$ _____
Non-Member – Short Course Only . . . . .	<input type="checkbox"/> \$345	<input type="checkbox"/> \$400	<input type="checkbox"/> \$455	\$ _____

**GENETIC COUNSELORS LUNCHEON AND FORUM: Thursday, April 4, 2019**

Risk Alleles – Discovery, Classification, and Reporting

ACMG Member Registration Fee . . . . .	<input type="checkbox"/> \$20	<input type="checkbox"/> \$20	<input type="checkbox"/> \$20	\$ _____
Non-Member Registration Fee . . . . .	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30	\$ _____

**DIVERSITY BREAKFAST: Friday, April 5 • 7:30 am – 8:30 am**

An educational and networking forum for students, trainees, and professionals in genetics who identify as an Under Represented Minority or are interested in promoting diversity in the genetics workforce. (Pre-registration required – Limited enrollment)

<input type="radio"/> <b>Trainee/Postdoctoral Fellow/Resident/Student</b> . . . . .	<input type="checkbox"/> \$10	<input type="checkbox"/> \$10	<input type="checkbox"/> \$10	\$ _____
<input type="radio"/> <b>Practicing Professional</b> . . . . .	<input type="checkbox"/> \$10	<input type="checkbox"/> \$10	<input type="checkbox"/> \$10	\$ _____

**SPECIAL STUDENT SESSION: Friday, April 5, 2019**

<input type="radio"/> <b>Careers in Medical Genetics – An Informational Session for Students</b> (Pre-registration required) . . . . .	Complimentary	Complimentary	<input type="checkbox"/> \$25/on-site	\$ _____
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Registration for this session includes a full one-day registration on Friday, April 5.

**NOTE: Students registering in FULL for the meeting should check if they plan to attend this session. Students may attend all sessions and events offered on this day.**

**TOTAL DUE: \$ \_\_\_\_\_**

**TRAINEE, POSTDOCTORAL FELLOW, RESIDENT AND STUDENT EVENTS:**

These events are included in the Trainee/Fellow/Resident and Student registration fees. Please select the events you will attend.

- Trainee/Postdoctoral Fellow/Resident/Student Welcome Reception** (Tuesday, April 2, 2019 • 6:00 pm – 7:30 pm)
- Trainee/Mentor Lunch** (Thursday, April 4 • 11:30 am – 1:00 PM)

Please select up to two topics of specialty area/interest (will be used for mentor table assignments):  Molecular Genetics  Clinical Genetics  Biochemical Genetics  Precision Medicine  Cancer Genetics  Clinical Cytogenetics  Prenatal Genetics  Science Writing for Publication and Grant writing  Research (Government, Industry)  Teaching

### SATELLITE SYMPOSIA

The following Satellite Symposia are complimentary, however pre-registration is required. (While presented in conjunction with the ACMG Meeting, Satellite Symposia are not a part of the official ACMG educational program as planned by the ACMG Annual Meeting Program Committee.) Check those you will attend, check only one per time slot if more than one is offered.

**Tuesday, April 2, 2019 • 6:00 pm – 7:30 pm**

- Exploring A New Frontier in Cancer Genetics – Clinical Insights and Evolving Concepts in The DNA Damage Response Pathway | *Supported by a grant from AstraZeneca* | CME available
- Ex vivo Gene Therapy for Lysosomal Storage Disorders - the Path from Promise to Patient | *Supported by a grant from Avrobio*
- Fabry Disease: Know When to Treat | *Supported by a grant from Sanofi Genzyme*

**Wednesday, April 3, 2019 • 8:00 am – 9:30 am**

- Are You Ready for Gene Replacement Therapy: Example from Spinal Muscular Atrophy | *Supported by a grant from AveXis* | CME available
- Diminishing the Burden of Phenylketonuria During Adulthood: New Science & Encouraging Stories Highlighting the Critical Role of Adjunctive Therapy | *Supported by a grant from BioMarin Pharmaceutical, Inc.* | CME available
- Exploring the Genetics and Management of Fabry Disease | *Supported by a grant from Sanofi Genzyme* | CME available
- The Medically Actionable Genome: Clinical Utility of WGS through Reproduction, Rare Disease, and Oncology | *Supported by a grant from Illumina* | CME available

**Friday, April 5, 2019 • 7:15 am – 8:45 am**

- Effects of Hyperammonemia on Brain Function: What Urea-lyly Need to Know | *Supported by a grant from Recordati Rare Diseases* | CME available
- Improving Care for Patients with Pompe Disease: A Look at Emerging Therapies and Multidisciplinary Management Strategies | *Supported by a grant from Sanofi Genzyme* | CME available
- A New Precision Medicine For Patients With Amenable Gene Variants And Fabry Disease | *Supported by a grant from Amicus Therapeutics*

● **DEMOGRAPHIC INFORMATION:** PLEASE PROVIDE THE FOLLOWING (REQUIRED) ATTENDEE INFORMATION.

Is this your first ACMG Annual Meeting?  Yes  No

■ **PLEASE INDICATE IF YOU ARE BOARD CERTIFIED.**

**American Board of Medical Genetics and Genomics (ABMGG)**

**Specialties of Genetics:**

- Clinical Geneticist  
 Clinical Biochemical Geneticist  
 Laboratory Geneticist/Genomicist  
 Clinical Cytogeneticist  
 Clinical Molecular Geneticist

**Subspecialties:**

- Medical Biochemical Genetics  
 Molecular Genetic Pathology

**Other Medical Specialties/Board Certifications:** (Please list)

\_\_\_\_\_

\_\_\_\_\_

**American Board of Genetic Counseling (ABGC):**

- Certified Genetic Counselor (CGC®)

■ **DEGREE/CREDENTIAL**

- MD  
 PhD  
 MD/PhD  
 DO  
 PharmD  
 Master's Degree – Genetic Counseling  
 Master's Degree – Nursing  
 Master's Degree – Public Health  
 Master's Degree – Other  
 MBA  
 JD  
 CLS  
 RN/BSN  
 Bachelor's Degree  
 Other: \_\_\_\_\_

■ **ETHNICITY (OR RACE)**

- White  
 Hispanic or Latino  
 Black or African American  
 Native American or American Indian  
 Asian / Pacific Islander  
 Other: \_\_\_\_\_  
 Prefer not to respond

■ **PRIMARY INTEREST/SPECIALTY**

- Biochemical genetics  
 Cancer genetics  
 Clinical genetics  
 Cytogenetics  
 Maternal Fetal Medicine  
 Molecular Genetic Pathology  
 Neurogenetics  
 Obstetrics and Gynecology  
 Pediatrics

- Prenatal  
 Public Health genetics  
 Research  
 Laboratory  
 Genetic counseling  
 Biotechnology/Pharmaceutical  
 Education  
 Parent/Patient Advocacy  
 Other: \_\_\_\_\_

■ **PRIMARY ROLE/POSITION HELD**

- Clinical Geneticist  
 Pediatric Physician  
 Obstetric Physician  
 Physician, other specialty  
 Laboratory Director/Supervisor  
 Genetic Counselor  
 Nurse/Nurse Practitioner  
 Educator  
 Researcher  
 Public Health Professional  
 Dietician  
 Physician Assistant  
 Public Health  
 Laboratory Technologist/Technician  
 Corporate (Biotech/Pharma) Executive  
 Fellow  
 Post Doctoral Trainee/Resident  
 Student  
 Advocacy  
 Other: \_\_\_\_\_

■ **PRINCIPAL WORK SETTING/INSTITUTIONAL AFFILIATION**

- Academic Medical Center/University  
 Academic Laboratory  
 Managed care organization/HMO  
 Medical practice – single specialty  
 Medical practice – multiple specialty  
 Commercial laboratory  
 Pharmaceutical/Biotechnology Company  
 Government agency (State/Federal-Nonmilitary)  
 Consulting (group or self employed)  
 Hospital  
 U.S. military  
 Non Profit organization  
 Other: \_\_\_\_\_

■ **NUMBER OF YEARS IN PRACTICE**

- Less than 5 years  
 6–10 years  
 11–15 years  
 16–20 years  
 21–25 years  
 More than 26 years  
 Not applicable

## ● EMERGENCY CONTACT INFORMATION

CONTACT NAME: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

YOUR CELL PHONE NUMBER: \_\_\_\_\_



Check here if you have a disability that requires special accommodations or need assistance to fully participate in the meeting. If checked, you will be contacted to determine your specific requirements. Please specify your type of disability?  Mobility  Hearing  Sight  Other—please describe: \_\_\_\_\_

**Specify dietary restrictions (allergies, intolerances and medical purposes or religion-based only).**  Gluten Free  Nut Allergies  Shellfish Allergies  Vegan  Vegetarian  Lactose Intolerance  Dairy Allergies  Seafood Allergies  Other—please describe: \_\_\_\_\_

**Note:** Meals are served buffet style and will have vegetarian, gluten and dairy free options available. Selections will be marked for contents.

**Registration is not complete until payment is received and cleared.** Online registration confirmations are sent immediately. Registration confirmations for mailed forms will be sent electronically within two weeks of receipt of payment. Contact [acmg2019@acmg.net](mailto:acmg2019@acmg.net) if you do not receive a confirmation email within two weeks of registering. **Note: Confirmations must be shown on-site to receive badges/materials.**

National Provider ID# \_\_\_\_\_ As part of the healthcare reform legislation signed into law in March 2010, the Physician Payment Sunshine Act requires medical device, biologic, and drug companies to track all payments and transfers of value (TOV) to U.S. healthcare providers made on or after Jan. 1, 2012. To assist 2019 ACMG Annual Meeting exhibitors in complying with the federal mandate, ACMG is requesting that attendees supply their NPI number when registering for the meeting. The NPI will be imbedded in the bar code data on the attendee's badge—it will NOT be printed on the badge. Exhibitors will download the NPI information by swiping the badge through a lead retrieval system so that they can record and track any reportable transactions. See the registration pages of [www.acmgmeeting.net](http://www.acmgmeeting.net) for more information. If attendee does not know their NPI number it can be obtained at <https://npiregistry.cms.hhs.gov/NPPESRegistry/NPIRegistry-Home.do>.

## ● PAYMENT INFORMATION

**(Payment must accompany registration)**

For institutional purposes, the ACMG Federal ID number is 52-1774227

**Total amount enclosed: \$** \_\_\_\_\_

**CHECK** in U.S. funds made payable to: **American College of Medical Genetics and Genomics (ACMG)**. A \$50 processing fee will be charged for all returned checks.

**CREDIT CARD:**  Visa  MasterCard  American Express  Discover

CARD NUMBER: \_\_\_\_\_

EXP. DATE: \_\_\_\_\_

3- OR 4-DIGIT SECURITY CODE: \_\_\_\_\_

NAME OF CARD HOLDER: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

I understand and consent that as part of my registration and attendance at the event, personal data will be collected by the organizer and potential exhibitors and technology partners for the purposes of (but not limited to) marketing, tracking attendance via scanner and/or lead retrieval, event apps, and/or the awarding of continuing education credits where applicable. To see ACMG's full privacy policy, please refer here: [www.acmg.net](http://www.acmg.net) – Terms and Conditions

**I have read and understood the event policies above. (This box must be checked to process registration.)**

**Please check the box above to show that you have read and understood the following Event Policies.**

**CANCELLATION POLICY:** Cancellations must be submitted in writing. All cancellations are subject to a nonrefundable processing fee of 20% of all registration fees paid and must be received by February 1, 2019 to be eligible for a refund. Cancellation notices should be sent via fax: (301) 718-9604 or email [acmg2019@acmg.net](mailto:acmg2019@acmg.net). Cancellations received after February 1, 2019 will NOT be refunded. After the deadline, in cases of emergency, refunds will be considered on a case-by-case basis. These requests must be made in writing (no telephone calls please), within 10 days after the meeting. Allow four weeks to process refunds and for the review of emergency cases. Registration transfers and/or name substitutions are not accepted.

**CONSENT FOR USE OF PHOTOGRAPHIC IMAGES:** Registration and attendance at, or participation in, ACMG meetings and other activities constitutes an agreement by the registrant to permit ACMG's use and distribution (both now and in the future) of the registrant or attendee's image or voice in photographs, videotapes, electronic reproductions, audiotapes of such events and activities.

**USE OF RECORDING EQUIPMENT:** Taking photos, videos or audiotapes of slides, posters and presenters or questions and answers is strictly prohibited. Copyright and intellectual property law is observed during all ACMG presentations, sessions and events.