

2021

ACMG Annual Clinical Genetics Meeting

APRIL 13-16

a virtual experience



DEVELOPING COUNTRIES REGISTRATION FORM

Register Today!



Email to: acmg2021@acmg.net
Payment by credit card only



2021 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: _____

MAILING ADDRESS: _____

CITY: _____ STATE/PROVINCE: _____ ZIP/POSTAL CODE: _____ COUNTRY: _____

TELEPHONE: _____ JOB TITLE: _____

ATTENDEE 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)

Are you an ACMG Member? Yes No

NOTE: All correspondence with registered attendees is via email. To ensure 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: acmg2021@acmg.net, acmgmeeting@acmg.net, education@acmg.net and acmgsupport@cmrus.com.

REGISTRATION FEES

DEVELOPING COUNTRIES TIER 1:

	PRICE	AMOUNT
MD, PhD, Laboratory Director, DO, Commercial/Corporate Representative	<input type="checkbox"/> \$50	\$ _____
SELECT REGISTRATION CATEGORY: <input type="radio"/> Genetic Counselor <input type="radio"/> Nurse <input type="radio"/> Physician Assistant	<input type="checkbox"/> \$50	\$ _____
<input type="radio"/> Dietitian <input type="radio"/> Laboratory Technologist/Technician <input type="radio"/> Non-profit Advocacy Representative		
Trainee/Postdoctoral Fellow/Resident ¹	<input type="checkbox"/> \$25	\$ _____
Student (Medical School, Graduate School or Undergraduate Levels) ²	<input type="checkbox"/> \$25	\$ _____

DEVELOPING COUNTRIES TIER 2:

MD, PhD, Laboratory Director, DO, Commercial/ Corporate Representative	<input type="checkbox"/> \$100	\$ _____
SELECT REGISTRATION CATEGORY: <input type="radio"/> Genetic Counselor <input type="radio"/> Nurse <input type="radio"/> Physician Assistant	<input type="checkbox"/> \$100	\$ _____
<input type="radio"/> Dietitian <input type="radio"/> Laboratory Technologist/Technician <input type="radio"/> Non-profit Advocacy Representative		
Trainee/Postdoctoral Fellow/Resident ¹	<input type="checkbox"/> \$50	\$ _____
Student (Medical School, Graduate School or Undergraduate Levels) ²	<input type="checkbox"/> \$50	\$ _____
<input type="checkbox"/> Add the option to extend access to the recordings for 2 years	<input type="checkbox"/> \$99	\$ _____

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 13, 2021 • 12:30 pm – 5:30 pm

- Short Course 1:** A Clinician's Perspective on Obesity: Syndromic and Non-Syndromic Causes, Treatment and Challenges
- Short Course 2:** Integration of Functional Genomics to Improve Variant Interpretation and Diagnosis

	EARLY-BIRD On or before February 15	LATE February 16– April 16	AMOUNT
ACMG Member Registration Fee with Full Registration	<input type="checkbox"/> \$160	<input type="checkbox"/> \$240	\$ _____
Non-Member Registration Fee with Full Registration	<input type="checkbox"/> \$200	<input type="checkbox"/> \$280	\$ _____
Member – Short Course Only	<input type="checkbox"/> \$200	<input type="checkbox"/> \$280	\$ _____
Non-Member – Short Course Only	<input type="checkbox"/> \$240	<input type="checkbox"/> \$320	\$ _____

SPECIAL STUDENT SESSION:

- Careers in Medical Genetics – An Informational Session for Students** (Pre-registration required)

Complimentary Complimentary

TOTAL DUE: \$ _____

¹ **Trainee/Postdoctoral Fellow/Resident:** Those qualifying for this registration fee must be enrolled in 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.

² **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.

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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 Biochemical Geneticist
- Clinical Cytogenetics and Genomics
- Clinical Genetics and Genomics
- Clinical Molecular Genetics and Genomics
- Laboratory Genetics and Genomics
- PhD Medical Genetics

American Board of Genetic Counseling (ABGC):

- Certified Genetic Counselor (CGC®)

DEGREE/CREDENTIAL

- MD
- PhD
- MD/PhD
- DO
- PharmD
- EdD
- Master's Degree – Genetic Counseling
- Master's Degree – Nursing
- Master's Degree – Public Health
- Master's Degree – Other
- LGC (Licensed Genetic Counselor)
- CGC (Certified Genetic Counselor)
- CLS (Clinical Laboratory Scientist)
- MBA
- JD
- RN/BSN
- Bachelor's Degree
- Not Applicable

PRIMARY INTEREST/SPECIALTY

- Biochemical genetics
- Cancer genetics
- Cardiovascular genetics
- Clinical genetics
- Corporate – Biotechnology, Pharmaceutical, Other Corporate Function
- Cytogenetics
- ELSI
- Maternal Fetal Medicine
- Metabolic/Dietary

- Molecular genetics
- Neurogenetics
- Obstetrics and Gynecology
- Pediatrics
- Prenatal
- Public Health genetics
- Research
- Laboratory
- Genetic counseling
- Biotechnology/Pharmaceutical
- Education
- Parent/Patient Advocacy
- Not Applicable

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
- Dietitian
- Physician Assistant
- Public Health
- Laboratory Technologist/Technician
- Corporate (Biotech/Pharma) Executive
- Fellow
- Post Doctoral Trainee/Resident
- Student
- Patient/Family Advocacy
- Government Relations/Advocacy
- Not Applicable

**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
- Commercial/Corporate (Pharmaceutical, Biotechnology, Software Sales, Insurance, etc.)

- Government agency (State/Federal-Nonmilitary)
- Consulting (group or self-employed)
- Hospital
- U.S. Military
- Non-profit organization
- Retired
- Not Applicable

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

WHAT ASPECTS OF ACMG ARE MOST IMPORTANT TO YOU?

- Education programs
- Practice resources
- Advocacy activities
- Membership benefits

WHAT ARE YOUR SHARED INTERESTS?

Check all that apply:

- Wine lover
- Love to travel
- Dog lover
- Cat lover
- Foodie
- Love to run
- Bread baker
- Yoga
- Craft beer enthusiast
- None of the above

ACMG OPT-IN

Go to the ACMG website (www.acmg.net) to update your privacy preferences. Failure to do so will mean you no longer receive news about ACMG programs.

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Check here if you have a disability that requires special accommodations or need assistance to fully participate in the virtual meeting. If checked, you will be contacted to determine your specific requirements.

Please specify your type of disability: Hearing Sight Other, please describe: _____

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 acmg2021@acmg.net if you do not receive a confirmation email within two weeks of registering.

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 meeting sponsors in complying with the federal mandate, ACMG is requesting that attendees supply their NPI number when registering for the meeting. Sponsors will collect NPI information with other basic demographics when an attendee visits their page in the Industry Solution Center. If attendee does not know their NPI number it can be obtained at <https://npiregistry.cms.hhs.gov>.

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: _____

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

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

I have read and agree to the [ACMG Virtual Meeting Code of Conduct](#) (click to read).

CANCELLATION POLICY: No refunds will be granted for the Virtual Meeting registration. If you are unable to view content during the scheduled webcasting times, all sessions will be recorded and available for replay. Content will be available to watch for 90 days after the conclusion of the live broadcast days.

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.

For more information, visit: www.acmgmeeting.net

Follow ACMG on social media for updates.



#ACMG21