

Registration Form

This form is only for those paying by check.

Online meeting registration and a meeting schedule are on the website: <https://acpacares.org/annual-meeting>

First Name _____ Middle Name _____

Last Name _____ Badge Name _____

Designation (s) _____ Specialty _____

Address _____

City _____ State/Prov _____ Zip/Postal _____ Country _____

Phone _____ Mobile Phone _____

E-Mail _____

Dietary Restrictions _____

Emergency Contact Name _____ Phone Number _____

If you are a first time ACPA Annual Meeting attendee, would you like to participate in our new Buddy Program?

Yes _____ No _____ I am not a first time Annual Meeting attendee _____

Do you plan on attending the Welcome Reception on Tuesday night (included with registration)? Yes _____ No _____ Unsure _____

Sharing of Information: ACPA shares certain attendee information with our supporting and exhibiting companies in an effort to connect you with companies which best serve your interests. If you would like to opt-in to share your information, please check here _____

Annual Meeting: Tuesday April 9 - Saturday April 13, 2024

All educational sessions and social events are included in the registration rate. In-person attendees will have access to virtual On-Demand sessions as well.

Type of Registration	1/3 – 2/5/24	2/6 – 4/8/24	Onsite	Amount
Professional Member _____	\$575	\$625	\$695	_____
Professional Non-Member ¹ _____	\$875	\$945	\$995	_____
Student/ Early Career/ Retired/ Life Member _____	\$50	\$50	\$50	_____
Student/ Early Career Non-Member ^{1,2} _____	\$250	\$250	\$250	_____
Affiliate Member _____	\$50	\$50	\$50	_____
Affiliate Non-Member _____	\$100	\$100	\$100	_____

Affiliate Member and Non-Member registration is not eligible for claiming accredited continuing education credits.

Annual Meeting: Virtual Package

If you are unable to attend the 2024 Annual Meeting in person, sign up for a virtual meeting package below.

Type of Registration	1/3 – 2/5/24	2/6 – 4/8/24	Amount
Professional Member _____	\$250	\$300	_____
Professional Non-Member ¹ _____	\$525	\$575	_____
Student/Early Career/ Retired/ Life Member _____	\$50	\$50	_____
Student/ Early Career Non-Member ^{1,2} _____	\$250	\$250	_____

¹ Non-Members can receive the ACPA Member rate by joining ACPA before registering for the meeting. The combined cost of Annual Membership and Member Meeting Registration is less than a Non-Member Annual Meeting Registration. Visit <https://acpacares.org/membership> to join ACPA.

² Student/Early Career non-members **must enclose** a statement from their department head attesting to current student, resident, fellow, or early career status.

First and Last Name: _____

Pre-Conference Symposium: Tuesday April 9, 2024

Implementing Research and Quality Improvement in Your Cleft Palate and Craniofacial Team

Type of Registration	1/3 – 4/8/24	Onsite	Amount
ACPA Members and Non-Members	\$150	\$150	_____
Student/ Early Career/ Retired/ Life Members	\$50	\$50	_____

Other Events:

ASCFS Meeting and Luncheon: Friday, April 12th, 12:00 – 1:00 pm. Open only to ASCFS members \$90 _____

A guest ticket may be purchased for the Welcome Reception: Tuesday, April 9th, 6:00 – 8:00pm

Guest's Name: _____
\$45 _____

ACPA Support:

I would like to make a contribution to ACPA. ☐ \$500 ☐ \$250 ☐ \$100 ☐ \$50 ☐ Other \$ _____

Payment:

*Make checks payable to ACPA Annual Meeting
and return this form to:*

American Cleft Palate Craniofacial Association
P.O. Box 63193
Charlotte, NC 28263-3193

Total for this registrant \$ _____

Total enclosed \$ _____

Check number _____

Fax: (919) 933-9604
Email: meetings@acpaca.org

Payment Policy: Payments must be paid in full by personal or institutional check, or U.S. money order at the time of registration. Payments must be made in U.S. funds and drawn from a U.S. bank.

Cancellation Policy: All registration cancellations and refund requests must be made in writing by March 11, 2024. A refund of the full conference fee, minus a \$50 administrative fee, will be given for cancellations received by that date. No refunds will be granted for requests submitted after March 11, 2024. Submit all requests to ACPA via email at meetings@acpaca.org. ACPA regrets that refunds will not be given for no-shows.

Substitutions will be accepted. A substitution of your full registration is permitted prior to the conference by submitting a written request to meetings@acpaca.org, by March 31, 2024.