



ACPA AM26

ANNUAL MEETING

Boston, MA

March 24-28, 2026

Registration Form

Today's Date: _____

This form is only for registrants submitting payment by check

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

First Name _____ Middle Name _____

(if different than

Last Name _____ Badge Name First and Last Name _____

Designation/Credential(s) _____ Specialty _____

Address _____

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

Institution/Company Name _____ Phone Number _____

Email _____

Dietary Restrictions _____

Emergency Contact Name _____ Phone Number _____

If you are a first time ACPA Annual Meeting attendee, would you like to participate in the 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, March 24 - Saturday, March 28, 2026

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

Type of Registration	1/5 – 2/2/26	2/3 – 3/23/26	Onsite	Amount
Professional Member _____	\$600	\$650	\$715	_____
Professional Non-Member ¹ _____	\$895	\$965	\$1,115	_____
Student or Early Career Member _____	\$75	\$75	\$75	_____
Retired or Life Member _____	\$350	\$350	\$350	_____
Student or Early Career Non-Member ^{1,2} _____	\$275	\$275	\$275	_____
*Affiliate Member _____	\$100	\$100	\$100	_____
*Affiliate Non-Member _____	\$225	\$225	\$225	_____

Affiliate Member and Non-Member registration is not eligible for claiming accredited continuing education credits or receiving access to recordings.

Annual Meeting: Recorded Sessions Package

If you are unable to attend the 2026 Annual Meeting in person, sign up for a recordings package below.

Type of Registration	1/5 – 2/2/26	2/3 – 3/23/26	Amount
Professional Member _____	\$250	\$250	_____
Professional Non-Member ¹ _____	\$525	\$525	_____
Student or Early Career Member _____	\$50	\$50	_____
Student or 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. Visit <https://acpacares.org/membership/> to join.

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

Registrant's First and Last Name: _____

Pre-Conference Symposium: Tuesday, March 24th from 12:30-5:30pm
Topic: Advancing Global Cleft Care: Opportunities, Innovations, and Partnerships

Type of Registration	1/5 – 3/23/26	Onsite	Amount
ACPA Members and Non-Members	\$125	\$125	_____
ACPA Student Members	\$50	\$50	_____

Other Events:

ASCFS Meeting and Luncheon: Friday, March 27th, 12:00 – 1:00 pm. Open to ASCFS members only \$95 _____

A guest ticket may be purchased for the Welcome Reception: Tuesday, March 24th, 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:*

Total for this registrant \$ _____

Total enclosed \$ _____

American Cleft Palate Craniofacial Association
510 Meadowmont Village Circle, Suite 377
Chapel Hill, NC 27517

Check number _____

Be sure to include this form with the payment when mailing

Email: meetings@acpacares.org

Cancellation Policy: All registration cancellations and refund requests must be made in writing by March 2, 2026. A full refund, minus a \$50 administrative fee, will be given for cancellations received by that date. No refunds will be granted for requests submitted after March 2, 2026. Optionally, you may request to transfer the total payment to only the next year's Annual Meeting. Submit all requests via email at meetings@acpacares.org. Refunds will not be given for no-shows.

Substitutions: Substitutions are accepted. A substitution of your full registration from in-person to recorded sessions, minus a \$50 administrative fee, is permitted. Email the request to meetings@acpacares.org by March 9, 2026. After that date, substitutions are still accepted without a refund of the difference.

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.