

Registration Form

56th annual AORN Congress
March 14 – 19, 2009 • Chicago, IL
Early-Bird Registration Deadline: January 26, 2009
Register by January 26 and save up to \$125!

Four Easy Ways to Register

Internet: Register 24-hours a day online at aorn.org/Congress
Phone: (303) 755-6304, ext. 1 • (800) 755-2676, ext. 1
Fax: (303) 750-3212 (credit cards only) or (800) 847-0045
Mail: AORN Inc. C/S- Registration, 2170 S. Parker Road, Suite 300,
Denver, CO 80231-5177

Register by January 26, 2009 and enjoy the Early-Bird Discount Rate.

Register by January 16, 2009 together with your completed *Session Preference Sheet* and you will automatically be entered into a random drawing to win a FREE Congress weekly attendee registration for Chicago, IL in March of 2009.* Only eligible entries received by end of business January 16, 2009 (MST) are eligible to win. Eligible entries consist of a fully completed registration form PLUS a fully completed *Session Preference Sheet*. Registrations received without the completed *Session Preference Sheet* and after end of business on January 16, 2009 (MST) are not eligible to win. Intensive Workshops and event fees are excluded from this offer.

1. Personal Information

AORN Membership Number

Formal First Name Middle Initial Formal Last Name

Home Address

City State/Province Zip/Postal Code -

Country

Home Phone Preferred Email Address*

*required for registration confirmation

I give permission to add my email address to the onsite Expo Card used during the conference.

Work Place Work Address

City State/Province Zip/Postal Code -

Country Work Phone

Preferred Badge First Name Job Title (for badge)

Mail badge to: Home Address Work Address

All registrations received by February 20, 2009 will receive conference materials and badges via US Mail.

2. Registrant Profile

A. Registration Category: Member Non-Member Press/Media Spouse/Guest Student Faculty
(Press/Media/Student/Faculty/International attendees not eligible for advanced badge mailing)

B. Congress Delegates, see page 32

C. How often have you been to Congress? First-Time Attendee 2-5 times 6-7 times 8-10 times 11 or more times

D. Are you currently active military personnel? Yes No If yes, which branch? Army Navy Air Force Marines Rank:

E. I do not wish to receive any Exhibitor Conference mail. Yes No

F. My age group is: 20-25 26-35 36-40 41-50 51-60 61 and over

G. Were you referred by a friend or colleague? If yes, please enter their name and email address:
Full Name: Email:

H. If you have attended Congress before, please provide us with your most recent attendance year: 2008 2007 2006 2005 2004 Before 2004

3. Job Position

Nurse Mgr/Supervisor/Coordinator/TM Private Scrub Nurse Clinical Nurse Specialist Retired Team Manager
 Director/VP Asst Director Nurse RN First Assistant Nurse Practitioner Inactive in Nursing Std Adv Nursing
 Educator/Staff Development Researcher Consultant Full Time Faculty Territory Manager
 Hospital/Faculty Administrator Student Nurse Physician Pharmacist Staff Nurse
 Sales Representative Materials Management

4. Intensives Workshop Selection & Registration Fees (#09003)

Check the sessions if you wish to attend.

	Early Bird		Regular	
	Received by 01/26/09	Received after 01/26/09	Received by 01/26/09	Received after 01/26/09
	Member	Non-Member	Member	Non-Member
Saturday-Sunday (1.5 day)	<input type="checkbox"/> \$530	<input type="checkbox"/> \$630	<input type="checkbox"/> \$630	<input type="checkbox"/> \$830
Saturday-Sunday (1.5 day)	<input type="checkbox"/> \$895	<input type="checkbox"/> \$1095	<input type="checkbox"/> \$995	<input type="checkbox"/> \$1295
Saturday-Sunday (1.5 day)	<input type="checkbox"/> \$255	<input type="checkbox"/> \$390	<input type="checkbox"/> \$320	<input type="checkbox"/> \$470
Saturday (1 day)	<input type="checkbox"/> \$200	<input type="checkbox"/> \$310	<input type="checkbox"/> \$250	<input type="checkbox"/> \$370
Sunday (1 day)	<input type="checkbox"/> \$200	<input type="checkbox"/> \$310	<input type="checkbox"/> \$250	<input type="checkbox"/> \$370
Saturday (AM)	<input type="checkbox"/> \$100	<input type="checkbox"/> \$155	<input type="checkbox"/> \$125	<input type="checkbox"/> \$185
Saturday (PM)	<input type="checkbox"/> \$100	<input type="checkbox"/> \$155	<input type="checkbox"/> \$125	<input type="checkbox"/> \$185
Sunday (AM)	<input type="checkbox"/> \$100	<input type="checkbox"/> \$155	<input type="checkbox"/> \$125	<input type="checkbox"/> \$185
Sunday (PM)	<input type="checkbox"/> \$100	<input type="checkbox"/> \$155	<input type="checkbox"/> \$125	<input type="checkbox"/> \$185

Saturday-Sunday (1.5 day) 1330/1338

Saturday-Sunday (1.5 day) 1331/1339

Saturday-Sunday (1.5 day) 1342/1347

Saturday (1 day) 1332 1333 1334 1335 1336

Sunday (1 day) 1343 1345

Saturday (AM) 1328 1329

Saturday (PM) 1337

Sunday (AM) 1340 1341 1344

Sunday (PM) 1346 1349

5. Congress Registration Fees (Event #09002)

**Register by January 26, 2009
and save up to \$125!**

	Early Bird Received by 01/26/09		Regular Received after 01/26/09	
	Member	Non-Member	Member	Non-Member
Group (three or more with one form of payment)	<input type="checkbox"/> \$500/person	<input type="checkbox"/> N/A	<input type="checkbox"/> N/A	<input type="checkbox"/> N/A
Daily- Please select day(s):	<input type="checkbox"/> \$200/day	<input type="checkbox"/> \$300/day	<input type="checkbox"/> \$235/day	<input type="checkbox"/> \$310/day
<input type="checkbox"/> Sun <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thur				
Weekly Registration	<input type="checkbox"/> \$525	<input type="checkbox"/> \$680	<input type="checkbox"/> \$630	<input type="checkbox"/> \$805
Spouse/Guest (Contact Hours not available)	<input type="checkbox"/> \$305	<input type="checkbox"/> \$305	<input type="checkbox"/> \$305	<input type="checkbox"/> \$305

6. Exhibit Floor Only Registration

- 1-Day Nurse Exhibit Floor Only Access*: \$175
 3-Day Nurse Exhibit Floor Only Access*: \$400

*The *Nurse Exhibit Floor Only Access* registration category allows you access to the show exhibit floor ONLY. It does NOT allow access to any education, intensive, or other sessions and events outside the Exhibit Floor.

Four Easy Ways to Register



Internet
aorn.org/Congress



Phone (Customer Service)
(303) 755-6304 ext. 1
(800) 755-2676 ext. 1



Fax
(303) 750-3212 or (800) 847-0045
(credit cards only)



Mail
AORN, Inc.
Attention C/S-Registration
2170 S. Parker Road, Suite 300
Denver, CO 80231-5711

7. Student & Faculty Registration Fees

Congress Registration – Early Bird Deadline: January 26, 2009

Faculty:

I am registering as a faculty member attending the following days:

Received by 01/26/09 Sunday \$105 Monday \$105 Tuesday \$105 Wednesday (No Charge) Thursday \$105 Total Days x \$ _____
 Received after 01/26/09 Sunday \$130 Monday \$130 Tuesday \$130 Wednesday (No Charge) Thursday \$130 Total Days x \$ _____

Student:

I am registering as a student attending the following days (No Charge):
 Sunday Monday Tuesday Wednesday Thursday TOTAL \$ _____

I will attend the Student/Faculty Breakfast (No charge). Yes No Need a mentor or want to be a mentor? Visit aorn.org/Congress and learn more.

Badges

Student and Faculty registrations are not eligible for advanced badge mailing. Badges can be picked up onsite upon presentation of proper credentials. Please contact Customer Service for more information.

8. Special Events & Sessions

- Awards Dinner (pg 34) \$60 Attendee \$75 Spouse/Guest
- Closing Celebration (pg 35) \$60
- Denim & Diamonds Party (pg 36) \$50 If purchased before 02/28/09 \$60 at the door
- First-Time Attendee Orientation (pg 34) Free
- Managers' Networking Reception (pg 35) Free
- Next Generation Happy Hour (pg 35) Free
- Specialty Assembly Reception (pg 35) \$15
- Taste of Chicago (pg 35) (Discounted tickets) \$20 If purchased before 02/28/09 \$25 at the door
- 5K Run/Walk (see page 36 for registration form) \$25 Pre-Conference Registration by 02/28/09
 \$30 Onsite Registration

10. Method of Payment

Check enclosed payable to: AORN

Non U.S. members must remit bank draft in U.S. dollars drawn from a bank with U.S. affiliate.

Charge my: VISA MasterCard
 American Express Discover

Support AORN by using your AORN credit card. To apply for a card, visit aorn.org/PartnerPrograms.

Card # _____
 Exp. _____
 Signature _____

9. Membership

Non-Members – Join AORN and save on registration!

- | | |
|---|---------|
| <input type="checkbox"/> Standard (RN) 1-year | \$100 |
| <input type="checkbox"/> Standard (RN) 3-year | \$270 |
| <input type="checkbox"/> Lifetime (RN) | \$1,000 |
| <input type="checkbox"/> Associate (Non-RN) | \$100 |
| <input type="checkbox"/> Retired | \$40 |
| <input type="checkbox"/> Student | \$20 |
| <input type="checkbox"/> Faculty | \$100 |

Non-members may register at the member price by including membership dues with their registration. For complete membership information, visit aorn.org/Membership.

Money paid to national AORN Inc. for products, services, and dues are not deductible for federal income tax purposes as a charitable contribution, but it may be deductible as a business expense. Donations to AORN Inc. are not deductible.

Would you like to donate to the AORN Foundation?

\$5 \$10 \$25 \$50 \$100 Other: \$ _____

(Donations to AORN Foundation are tax deductible)

Total Due: \$