

## REGISTRATION FORM

December 5-8, 2021

Hilton Charlotte University Place • Charlotte, North Carolina, USA On-Demand Access through February 28, 2022

Register online at www.tms.org/HEA2021 Online registration requires credit card payment.

Fax this form to:
TMS Meeting Services
Fax: (724) 776-3770
Fax registration requires credit card payment.

MAIL

Return this form to: TMS Meeting Services 5700 Corporate Drive Suite 750 Pittsburgh, PA 15237 USA

## **Discount Registration Deadline: October 22, 2021**

Payment must accompany form. Forms received after October 22, 2021 will be processed at the standard rate. **REGISTRATION** In-person registration fee includes technical sessions, welcome reception. refreshment breaks, poster reception, and one ticket to the congress dinner. Last name: Discounta Standard On-Demand Only Member **\$790** \$890 \$350 Name/Nickname for badge: \_\_\_\_\_ Nonmember<sup>b</sup> \$895 \$995 \$470 \$575 \$475 \$200 Student<sup>c</sup> Affiliation/Employer:\_\_\_\_\_\_ <sup>a</sup> Discount rates through October 22, 2021. <sup>b</sup> Includes TMS e-membership through 2022. <sup>c</sup> Must be a full-time graduate or undergraduate student; a copy of student school identification card is required; nonmember students must mail or fax form. I plan on attending the congress dinner, included in my registration fee: This address is Business Home New Address Address Correction Street Address: IN-PERSON REGISTRANT ADDITIONAL/GUEST TICKETS FOR SOCIAL FUNCTIONS City: \_\_\_\_\_ State/Province: \_\_\_\_ Congress Dinner - Quantity: \_\_\_\_\_\_ @ \$125/each = \_\_\_\_ Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_ Guest/Spouse Name: Please note: Guests do not receive admission to technical sessions. Telephone: \_\_\_\_\_ Fax:\_\_\_\_\_ For in-person registrants, indicate any dietary restrictions for guest: ☐ Gluten-Free ☐ Vegetarian ☐ Other: \_\_\_\_\_ For in-person registrants, indicate any dietary restrictions: For in-person registrants, I agree to abide by the TMS COVID-19 ☐ Gluten-Free ☐ Vegetarian ☐ Other: \_\_\_\_\_ Release & Hold Harmless Agreement. Name of emergency contact: ☐ I agree to receive communications from TMS on society news, events. and initiatives (European Union, Brazil, Canada, and China residents only). Telephone of emergency contact: I permit TMS to share my e-mail address with its HEA 2021 sponsor partners. **REGISTRATION TOTAL PAYMENT** Payment should be made in U.S. dollars drawn on a U.S. bank. Registration Visa ☐ MasterCard ☐ Discover ☐ American Express Additional/Guest Tickets \$ Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_ CVV#: \_\_\_\_ **Total Payment** Cardholder Name: Payment Method (check all that apply): Signature: Check, Bank Draft, Money Order I authorize TMS to charge my credit card in the amount of \$ (Make checks payable to TMS.) ☐ Credit Card REFUND POLICY: Written requests must arrive at TMS no later than October 22, 2021. No refunds will be issued after October 22, 2021. A \$75 processing fee is charged for all cancellations.