

REGISTRATION FORM

ATTENDEE INFORMATION

AAWC MEMBER Member ID _____

MEMBERS RECEIVE A 20% DISCOUNT ON REGISTRATION. TO OBTAIN YOUR MEMBER ID OR TO JOIN THE AAWC, VISIT WWW.AAWCONLINE.ORG.

NPI Number (Required for MD/DO, DPM, NP, PA) _____ State in which you are licensed _____

First Name _____ Last Name _____

Degree/Credentials (RN, MD, DPM, etc.) _____

Title _____ Company/Organization Name _____

Address 1 Home Work _____

Address 2 Home Work _____

City _____ State _____ Zip _____ Country _____

Telephone _____ Fax _____

Email Address (Confirmations will be sent via email.) _____

PROFESSIONAL CATEGORY (CHOOSE CLOSEST TO YOUR PROFESSION)

- MD/DO DPM MSN/BSN/RN (CWO/CN, CWS, etc.) MSN/BSN/RN (no certificate)
 NP PT Dietitian/Nutritionist PharmD PhD Industry
 Researcher Occupational Therapist Health Facility Management (non-clinical)
 LPN/NA PA

IN WHICH CARE SETTING IS THE MAJORITY OF YOUR TIME SPENT?

- Home care Long-term care Hospital Private practice Wound care center/clinic
 University Vascular lab VA hospital Hospice Research and industry
 Other _____

HOW DID YOU FIND OUT ABOUT THIS YEAR'S MEETING?

- Journal advertisement Direct mail Email AAWC Prior attendee
 Google/other search engine Website SAWC sales rep Colleague/employer
 WHS Other _____

IS THIS YOUR FIRST SAWC? _____

ARE YOU A POSTER PRESENTER? Yes No

ARE YOU ATTENDING THE AAWC MEMBERS-ONLY HALLOWEEN COSTUME PARTY ON 11/2/18?
Yes No

ARE YOU ATTENDING THE AAWC SPEAKER TRAINING SESSION ON 11/4/18? Yes No

ARE YOU ATTENDING THE POSTER RECEPTION ON 11/3/18? Yes No

ARE YOU CURRENTLY A FULL- OR PART-TIME FEDERAL EMPLOYEE (ACTIVE MILITARY, VA, ETC.)? Yes No

VISIT SAWCSRING.COM FOR ACTIVE-DUTY MILITARY PRICING.

SESSION REGISTRATION

PLEASE CIRCLE THE MAIN CONFERENCE SESSIONS, LISTED BELOW, THAT YOU WISH TO ATTEND.

PRE-CONFERENCE: THURSDAY, NOVEMBER 1, 2018 (Additional fees apply.)				
1:00 PM-5:00 PM	PRE-CONFERENCE			
DAY 1 FRIDAY, NOVEMBER 2, 2018				
10:30 AM-11:30 AM	1	2	3	4
1:20 PM-2:20 PM	5	6	7	8
2:30 PM-3:30 PM	9	10	11	12
3:40 PM-4:40 PM	13	14	15	16
DAY 2 SATURDAY, NOVEMBER 3, 2018				
9:00 AM-10:00 AM	17	18	19	
10:10 AM-11:10 AM	20	21	22	
3:00 PM-4:00 PM	23	24	25	
4:10 PM-5:10 PM	26	27	28	
Session 29: AAWC Research Poster Grand Rounds				
5:30 PM-6:15 PM	I will be attending the Poster Gala, but not the Ground Rounds.			
	I will not be attending the Poster Grand Rounds or Poster Gala.			
DAY 3 SUNDAY, NOVEMBER 4, 2018				
9:00 AM-10:00 AM	31	32	33	
10:10 AM-11:10 AM	34	35	36	
11:20 AM-12:20 PM	37	38	Oral Abstracts	
2:00 PM-3:00 PM	39	40	41	
3:15 PM-4:15 PM	42	43	44	
POST-CONFERENCE (Additional fees apply.)				
4:30 PM-7:30 PM	POST-CONFERENCE			

Pre-Registration Seating in certain sessions may be limited, so be sure to register early. Registrations will be accepted by fax, mail, and the Internet. Registrations cannot be done through the phone. Fax and Internet registrations are for credit card payments only. Register online at www.sawcfall.com or complete the enclosed registration form and return it with your credit card payment or check made payable to HMP.

All registration forms received without a method of payment will not be considered pre-registered and you will be required to register onsite.
Register Online www.sawcfall.com (credit card payments only)
Register by Mail All checks must be drawn on a U.S.

bank in U.S. funds and sent with your registration form to HMP, Attention: SAWC Fall Registration Department, 70 E. Swedesford Road, Suite 100, Malvern, PA 19355
Register by Fax 610-560-0502

Posters Accepted posters will be presented at the SAWC Fall. Healthcare professionals from around the world will gather to learn from colleagues about cutting-edge technology and techniques to aid them in day-to-day patient management. Visit www.sawcspring.com for submission guidelines.

Other Educational Activities Available at the SAWC Fall Keep an eye on your email for notifications regarding industry-supported symposia being offered at the SAWC Fall. These sessions will be offered during breakfast, lunch, and dinner hours. Please note that these sessions will not be offered to industry and they fill up quickly.

Children Under no circumstances will children younger than 18 be allowed in the Exhibit Hall during installation or dismantling. For insurance reasons, children younger than 18 are not permitted on the show floor. Because of limited seating capacity and the highly technical nature of the programs, children younger than 18 are not invited to attend presentations.

CONFERENCE REGISTRATION

CHOOSE MEMBER PRICING IF YOU ARE A MEMBER OF AAWC OR WHS. VISIT SAWCFALL.COM FOR ACTIVE-DUTY MILITARY AND CURRENT STUDENT RATES.

Main Conference (Non-Healthcare Provider) **EARLY BIRD** by 9/21/18 **PRICING AFTER** 9/22/18
NOTE: IF YOU ARE EMPLOYED BY INDUSTRY, YOU MUST REGISTER AS A NON-HEALTHCARE PROVIDER. \$600

Main Conference (PhD, MD, DPM) \$ _____
Membership pricing \$405 \$445
Non-member pricing \$510 \$560

Main Conference (RN, PT, PAs, Office Assistants) \$ _____
Membership pricing \$350 \$395
Non-member pricing \$440 \$495

Pre-Conference Only or **Post-Conference Only** \$ _____
Membership pricing \$100 \$115
Non-member pricing \$125 \$135

MVP – BEST VALUE!

MVP (PhD, MD, DPM) \$ _____
Membership pricing \$660 \$700
Non-member pricing \$830 \$880

MVP (RN, PT, PAs, Office Assistants) \$ _____
Membership pricing \$610 \$650
Non-member pricing \$765 \$815

ADDITIONAL ENTRY OPTIONS (NO DISCOUNTS MAY BE APPLIED)

One-Day Conference Pass \$400
Choice of day (check one): Friday, November 2 Saturday, November 3 Sunday, November 4

Guest Badge (Exhibit Hall Only) Must be a guest of a registered attendee. \$210
Not available to non-healthcare providers.

First Name _____ Last Name _____

SAWC Fall 2018 T-Shirt S M L XL XXL \$15

Today's Wound Clinic (TWC) \$84
Yearly subscription

TOTAL PAYMENT ENCLOSED

\$ _____

SAWCFALL.COM

800.213.0015

METHOD OF PAYMENT

CHOOSE FROM THE FOLLOWING OPTIONS.

Check payable to HMP
Mail to 70 E. Swedesford Road, Suite 100, Malvern, PA 19355
All checks must be drawn on a U.S. bank in U.S. funds.

Credit Card (check one)
 MasterCard Visa Discover American Express

Name on Card _____

Credit Card Number _____

Exp. Date _____ Security Code _____ Billing Postal Code _____

Signature of Cardholder (required)

NACCME will appear as the business name on your bank or credit card statement.

Cancellation Policy Cancellation requests must be received in writing and postmarked by September 17, 2018. All cancellations via email must be submitted by this date to sdonato@hmpglobal.com. Cancellations received by September 17, 2018 will receive a refund minus a \$100 processing fee. Registrants wishing to cancel must send someone to take their place without penalty if they send a written request with the replacement person's name by October 25, 2018. No refunds will be issued after September 17, 2018. If you do not cancel and do not attend the event, you are still responsible for the full payment. Payments made may not be applied toward tuition for future SAWC conferences or other meetings or products offered by NACCME. No refunds are offered for classes that may be suspended or shortened due to weather or other conditions/circumstances beyond HMP's control.

REGISTER EARLY & SAVE

SAWCFALL.COM | 800.213.0015