



2023

ACMG Annual Clinical Genetics Meeting

MARCH 14-18 • EXHIBIT DATES: MARCH 15-17
SALT PALACE • SALT LAKE CITY, UTAH
MARCH 18 | ACMG/SIMD JOINT SESSION

REGISTRATION FORM

REGISTER TODAY!



acmmeeting.net
Payment by credit card only



2023 ACMG Annual Meeting*
7101 Wisconsin Ave., Ste. 1101, Bethesda, MD 20814



acmmeeting@acmg.net*

*Payment by credit card or check must be included with mailed or emailed registration forms.

ATTENDEE INFORMATION (PLEASE PRINT OR COMPLETE ELECTRONICALLY)

First Name: _____ Mi: _____ Last Name: _____ Degrees/Credentials: _____

Institution: _____ Job Title: _____

Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____ Country: _____

Telephone: _____ Cell Phone: _____ Twitter Handle: _____

Attendee's Email Address (Required): _____ CC or Billing Email Address: _____

NOTE: All correspondence with registered attendees is via email. To ensure receipt of all important Annual Meeting related communications—please have your IT Department set your institution's server (or set your email filter, spam blocker or server directly) to accept and not block emails from the following email addresses: noreply@cmrus.com, acmmeeting@acmg.net, acmgsupport@cmrus.com, and education@acmg.net.

REGISTRATION FEES

ACMG MEMBERS: To qualify for the membership rates, ACMG membership dues must be paid by January 31, 2023. Pending ACMG members must pay the non-member fee. The difference will be reimbursed when membership is approved.

	EARLY-BIRD On or before Dec. 22, 2022	ADVANCE DISCOUNT Dec. 23 thru Feb. 9, 2023	LATE Feb. 10, 2023 thru on-site	AMOUNT
MD, PhD, Laboratory Director, DO, Commercial/Corporate Representative	<input type="checkbox"/> \$575	<input type="checkbox"/> \$675	<input type="checkbox"/> \$775	\$ _____
Mark registration category: <input type="radio"/> Genetic Counselor <input type="radio"/> Physician Assistant <input type="radio"/> Nurse Practitioner <input type="radio"/> Nurse	<input type="checkbox"/> \$460	<input type="checkbox"/> \$510	<input type="checkbox"/> \$610	\$ _____
<input type="radio"/> Dietitian <input type="radio"/> Laboratory Technologist/Technician <input type="radio"/> Non-profit Advocacy Representative				
Emeritus and Honorary	<input type="checkbox"/> \$95	<input type="checkbox"/> \$125	<input type="checkbox"/> \$150	\$ _____
Trainee/Postdoctoral Fellow/Resident ¹	<input type="checkbox"/> \$265	<input type="checkbox"/> \$315	<input type="checkbox"/> \$365	\$ _____
Student (Medical School, Graduate School or Undergraduate Levels) ²	<input type="checkbox"/> \$120	<input type="checkbox"/> \$140	<input type="checkbox"/> \$160	\$ _____
Add the 2023 Digital Edition – Advance Purchase (includes access to sessions for two years) ³	<input type="checkbox"/> \$199	<input type="checkbox"/> \$199	<input type="checkbox"/> \$199	\$ _____
NON-MEMBERS:				
MD, PhD, Laboratory Director, DO, Commercial/ Corporate Representative	<input type="checkbox"/> \$950	<input type="checkbox"/> \$1,050	<input type="checkbox"/> \$1,150	\$ _____
Mark registration category: <input type="radio"/> Genetic Counselor <input type="radio"/> Physician Assistant <input type="radio"/> Nurse Practitioner <input type="radio"/> Nurse	<input type="checkbox"/> \$715	<input type="checkbox"/> \$765	<input type="checkbox"/> \$865	\$ _____
<input type="radio"/> Dietitian <input type="radio"/> Laboratory Technologist/Technician <input type="radio"/> Non-profit Advocacy Representative				
Trainee/Postdoctoral Fellow/Resident ¹	<input type="checkbox"/> \$300	<input type="checkbox"/> \$350	<input type="checkbox"/> \$400	\$ _____
Student (Medical School, Graduate School or Undergraduate Levels) ²	<input type="checkbox"/> \$120	<input type="checkbox"/> \$140	<input type="checkbox"/> \$160	\$ _____
Add the 2023 Digital Edition – Advance Purchase (includes access to sessions for two years) ³	<input type="checkbox"/> \$249	<input type="checkbox"/> \$249	<input type="checkbox"/> \$249	\$ _____
OTHER:				
Accompanying Person/Guest ⁴ (age 12+ only)	<input type="checkbox"/> \$130	<input type="checkbox"/> \$160	<input type="checkbox"/> \$190	\$ _____
GUEST NAME #1: _____				(# x GUEST FEE)
One Day Registration: (If you wish to register for more than one day, you must register in full)	<input type="checkbox"/> \$350	<input type="checkbox"/> \$375	<input type="checkbox"/> \$400	\$ _____
Select Day: <input type="radio"/> Wednesday <input type="radio"/> Thursday <input type="radio"/> Friday <input type="radio"/> Saturday				
Student Day Only Registration (includes the Pathways to Genetics Careers session on.....	<input type="checkbox"/> \$0	<input type="checkbox"/> \$0	<input type="checkbox"/> \$25	\$ _____
Friday, March 17 and a one-day registration for the rest of that day)				
				TOTAL DUE: \$ _____

TRAINEE, POSTDOCTORAL FELLOW, RESIDENT AND STUDENT EVENTS:

These events are included in the Trainee/Fellow/Resident and Student registration fees. Please select the events you will attend.

- Early Career Job Hunt and Transition Success: Tips and Tricks for Getting Your First or Second Job in the Genetics Field | Tuesday, March 14 • 4:00 pm – 5:30 pm
- Welcome Reception for Trainees, Residents, Post-Doctoral Fellows and Students | Tuesday, March 14 • 6:00 pm – 7:30 pm
- Early Career Genetic Mentor Luncheon | Thursday, March 16 • 11:30 am – 1:00 pm
- Student Workshop: Pathways to Genetics Careers | Friday, March 17 • 1:30 pm – 3:30 pm

¹ **Trainee/Postdoctoral Fellow/Resident:** Those qualifying for this registration fee must be enrolled in a postdoctoral training, residency or fellowship program in genetics or a related discipline. Please provide verification of this status when submitting the registration form to qualify for the discounted fee. Those who register onsite should bring a letter signed by their department head to certify current status.

² **Student Registration:** Those qualifying for this registration fee must be enrolled in medical school or an undergraduate or graduate program. Please provide verification of this status when submitting the registration form to qualify for the discounted fee. Those who register onsite should bring a student ID card or a letter signed by their department head to certify current status.

³ **Digital Edition:** The Digital Edition provides access to sessions on demand for two years, with the ability to claim CE credits. It will be available approximately three to four weeks after the meeting concludes. ACMG will email a link to access the content when it becomes available.

⁴ **Accompanying Person/Guest Registration:** Spouses and/or other social guests (age 12+ only) of full meeting registrants are welcome. Professional attendees may not register as guests. The guest registration fee is required for all persons 12 or older who wish to attend the ACMG Opening Reception and access the Exhibit Hall. Guest registration DOES NOT allow access to sessions. Children are not permitted in educational sessions. Because of liability issues, children under 12 years of age are not permitted in the Exhibit Hall and cannot be registered as guests.



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DEMOGRAPHIC INFORMATION: Please provide the following (REQUIRED) attendee information.

IS THIS YOUR FIRST ACMG ANNUAL MEETING?

- Yes
- No

ARE YOU BOARD CERTIFIED?

American Board of Medical Genetics and Genomics (ABMG)

Specialties of Genetics:

- Clinical Biochemical Geneticist
- Clinical Cytogenetics and Genomics
- Clinical Genetics and Genomics
- Clinical Molecular Genetics and Genomics
- Laboratory Genetics and Genomics
- PhD Medical Genetics

HIGHEST DEGREE/CREDENTIAL

(Choose one)

- MD
- PhD
- MD/PhD
- DO
- PharmD
- EdD
- Master's Degree – Genetic Counseling
- Master's Degree – Nursing
- Master's Degree – Public Health
- Master's Degree – Other
- MBA
- JD
- RN, BSN
- Bachelor's Degree

PRIMARY INTEREST/SPECIALTY

- Biochemical genetics
- Cancer genetics
- Cardiovascular Genetics
- Clinical genetics
- Corporate – Biotechnology, Pharmaceutical, Other Corporate Function
- Cytogenetics
- Maternal Fetal Medicine
- Metabolic/Dietary
- Molecular Genetics
- Neurogenetics

- Obstetrics and Gynecology
- Pediatrics
- Prenatal
- Public Health genetics
- Research
- Laboratory (academic, commercial)
- Genetic counseling
- Education (Academic or CME Professional)
- Parent/Patient Advocacy
- Not Applicable

PRIMARY ROLE/POSITION HELD

- Clinical Geneticist
- Pediatric Physician
- Obstetric Physician
- Physician, other specialty
- Laboratory Director/Supervisor
- Genetic Counselor
- Nurse/Nurse Practitioner
- Educator (Academic or CME Professional)
- Researcher
- Public Health Professional
- Dietitian
- Physician Assistant
- Laboratory Technologist/Technician
- Corporate (Biotech/Pharma) Executive
- Fellow
- Post Doctoral Trainee/Resident
- Student
- Patient/Family Advocacy
- Government Relations/Advocacy
- Not Applicable

PRINCIPAL WORK SETTING/ INSTITUTIONAL AFFILIATION

- Academic Medical Center/University
- Academic Laboratory
- Managed care organization/HMO
- Medical practice – single specialty
- Medical practice – multiple specialty
- Commercial laboratory
- Commercial/Corporate (Pharmaceutical, Biotechnology, Software, etc.)
- Government agency (State/Federal-Nonmilitary)

- Consulting (group or self-employed)
- Hospital
- U.S. Military
- Non-profit organization
- Retired
- Not Applicable

NUMBER OF YEARS IN PRACTICE

- Less than 5 years
- 6-10 years
- 11-15 years
- 16-20 years
- 21-25 years
- More than 26 years
- Not applicable

WHAT ASPECTS OF ACMG ARE MOST IMPORTANT TO YOU?

- Advocacy activities
- Educational programs
- Membership benefits
- Practice resources
- Other: _____

HOW DID YOU HEAR ABOUT THE MEETING?

- ACMG Meeting Announcement in mail
- ACMG Website
- Ad in another genetics journal
- Ad in *Genetics in Medicine*
- Ad on another organization's website
- Email from ACMG
- Email from another genetics organization
- I've attended before
- Invited to speak or present
- Listing on Internet Educational Calendar
- Online banner ad during internet search
- Recommended by a colleague
- Social Media

EMAIL OPT-IN

Check the box(es) if you would like to receive emails about:

- ACMG Annual Meetings
- ACMG Educational opportunities



EMERGENCY CONTACT INFORMATION

CONTACT NAME: _____ PHONE NUMBER: _____

FOOD ALLERGIES, SENSITIVITIES AND DIETARY RESTRICTIONS

Please indicate any special assistance you require to participate in the meeting:

Mobility Audio Visual Other, please describe: _____

Food and beverages are provided in some sessions and breaks. ACMG plans menus and works with facility caterers to accommodate common food allergies and dietary restrictions. Please indicate below if you have food allergies/sensitivities or special dietary restrictions that we should know about. Food displays are labeled to warn for common allergens.

Food allergies and sensitivities:

- Dairy allergy
 Fish and shellfish
 Gluten intolerance or sensitivity
 Lactose intolerance
 Nuts and seeds (including peanuts and tree nuts)
 Soy

Dietary choices:

- Dairy-free No Red Meat
 Glatt Kosher Vegan
 Gluten-free Vegetarian
 Halal
 Kosher-style
 No Pork

PAYMENT INFORMATION Payment **MUST** accompany registration forms.

For institutional purposes, the ACMG Federal ID number is 52-1774227

- CHECK** in U.S. funds made payable to:
 American College of Medical Genetics and Genomics (ACMG)
 7101 Wisconsin Avenue, Suite 1101
 Bethesda, MD 20814

A \$50 processing fee will be charged for all returned checks.

TOTAL AMOUNT TO BE BILLED: \$ _____

- CREDIT CARD:** Visa MasterCard American Express Discover

Card Number: _____ Exp. Date: _____ 3- or 4-Digit Security Code: _____

Name of Card Holder: _____ Signature: _____

Billing Address: _____

Registration is not complete until payment is received and cleared. Registration confirmations for emailed and mailed forms will be sent electronically within two weeks of receipt of payment. Contact acmgmeeting@acmg.net if you do not receive a confirmation email within two weeks of registering.

NATIONAL PROVIDER ID NUMBER

National Provider ID# _____. As part of the healthcare reform legislation signed into law in March 2010, the Physician Payment Sunshine Act requires medical device, biologic, and drug companies to track all payments and transfers of value (TOV) to U.S. healthcare providers made on or after Jan. 1, 2012.

To assist 2023 ACMG Annual Meeting exhibitors in complying with the federal mandate, ACMG is requesting that attendees supply their NPI number when registering for the meeting. The NPI will be imbedded in the bar code data on the attendee's badge—it will NOT be printed on the badge. Exhibitors will download the NPI information by swiping the badge through a lead retrieval system so that they can record and track any reportable transactions. See the registration pages of www.acmgmeeting.net for more information. If attendee does not know their NPI number it can be obtained at www.npinumberlookup.org.

REGISTRATION CHANGES AND CANCELLATIONS

A request to cancel your registration must be emailed to acmgmeeting@acmg.net by February 17, 2023. All cancellations are subject to a 25% nonrefundable processing fee. Cancellation requests received after February 17, 2023 will NOT be refunded. After the deadline, in cases of emergency, refunds will be considered on a case-by-case basis. These requests must be emailed to acmgmeeting@acmg.net within 10 days of the conclusion of the meeting.

Meeting registrations cannot be transferred to another person. If an attendee cannot attend the Annual Meeting for any reason, their registration must be processed according to the refund policy above. Due to the importance of the demographic information and policy agreements collected, all substitutions and name changes will require a new registration.

Purchases of the Digital Edition Only cannot be transferred to a meeting registration. If you purchase the Digital Edition Only and then decide to attend the meeting, you will need to email education@acmg.net to cancel the purchase of the Digital Edition. You will also need to register for the meeting separately. If you purchase registration and then decide to switch to the Digital Edition Only, you will need to cancel your registration following the instructions above and purchase the Digital Edition Only separately.

Digital Edition Only cancellation requests must be emailed to education@acmg.net by February 17, 2023 in order to receive a full refund. Cancellation requests received after February 17, 2023 will NOT be refunded.



LIABILITY WAIVER AND EVENT POLICIES AGREEMENT

NOTE: ALL SIX BOXES ON THIS PAGE MUST BE CHECKED IN ORDER TO PROCESS REGISTRATION.

ATTENDEE AGREEMENTS

Attendees, speakers and exhibitors must agree to the following Waivers and Event Policies and Procedures in order to complete their registration.

HEALTH & SAFETY

LIABILITY WAIVER AND ASSUMPTION OF RISK

I understand that traveling to and participating in group events, including the ACMG Annual Clinical Genetics Meeting, may increase the risk of exposure to communicable diseases, and I knowingly assume that risk.

I hereby release from liability and waive all claims against ACMG, its directors, officers and employees, from and against any and all damages, liability, claims, and expenses arising from the contraction or spread of any disease, including but not limited to that resulting from COVID-19, in connection with my travel to or participation in any aspect of the meeting.

I understand and hereby agree to the ACMG **LIABILITY WAIVER AND ASSUMPTION OF RISK**.

DUTY OF CARE AND SELF-MONITORING RESPONSIBILITIES

I agree to comply with all COVID-related policies and procedures that may be implemented by ACMG and the meeting facility, including, but not limited to, acknowledging proof of vaccination against COVID-19 and all health and safety guidelines in place at the time of the meeting in order to protect the health and safety of all meeting participants as much as possible.

I agree to self-monitor for signs and symptoms of COVID-19 (symptoms typically include fever, cough, and shortness of breath) and notify ACMG if I test positive for COVID-19 during or within 10 days after attending the ACMG Annual Clinical Genetics Meeting.

I will not attend the ACMG Meeting if I am experiencing, or within 10 days of the start of the meeting, have experienced signs and symptoms of COVID-19, may have been exposed to a confirmed or suspected case of COVID-19, or have been diagnosed with COVID-19 and am not yet cleared as non-contagious by the health care team responsible for my treatment.

I understand and hereby agree to the **DUTY OF CARE AND SELF-MONITORING** responsibilities.

REQUIRED PROOF OF VACCINATION TO ATTEND

The 2023 ACMG Annual Clinical Genetics Meeting is being planned as an in-person event. In an effort to protect the health of ACMG meeting participants - ACMG staff, convention vendors and facility staff, and all meeting attendees will be required to provide proof that they are fully vaccinated against COVID-19. This policy is subject to change based on current CDC guidelines.

Attendees will be required to show their proof of vaccination when checking in to the meeting. Those unable to provide valid proof of vaccination may purchase the Digital Edition to access the session recordings post-meeting.

I understand and hereby agree that I will utilize the resources ACMG provides to **VERIFY PROOF OF VACCINATION**.

EVENT POLICIES AND PROCEDURES

PRIVACY POLICY/COLLECTION OF PERSONAL DATA

I understand and consent that as part of my registration and attendance at the event, personal data will be collected by ACMG and its technology partners and exhibitors for the purposes of (but not limited to) registration, housing, tracking attendance via scanner and/or lead retrieval, event apps, and/or the awarding of continuing education credits where applicable. View ACMG's full privacy policy at www.acmg.net.

I understand and hereby agree to the **EVENT POLICIES AND PROCEDURES** stated above.

CODE OF CONDUCT

I understand and hereby agree to the ACMG Meeting **Code of Conduct**.

CONSENT FOR USE OF PHOTOGRAPHIC IMAGES

ACMG intends to take photographs and video of this event for use in ACMG news and promotional material, in print, electronic and other media, including the ACMG and ACMG Meeting websites. By participating in this event, I grant ACMG the right to use any image, photograph, voice or likeness, without limitation, in its promotional materials and publicity efforts without compensation. All media become the property of ACMG. Media may be displayed, distributed or used by ACMG for any purpose.

USE OF RECORDING EQUIPMENT

Taking photos, videos or audiotapes of slides, posters and presenters or questions and answers is strictly prohibited. Copyright and intellectual property protections will be enforced during all ACMG presentations, sessions and events.

I understand and hereby agree to the **EVENT POLICIES AND PROCEDURES** above.

Please note that by checking these boxes during the registration process, you agree to adhere to the ACMG Health and Safety Guidelines and Duty of Care/Self-Monitoring Responsibilities and understand that you are knowingly and freely assuming all risks related to illness and infectious diseases, such as COVID-19, by attending this event. You understand that refusal to adhere to these policies and abide by these precautions may result in immediate removal from the event and cancellation of the registration, without receiving a refund.