PRE-REGISTRATION FORM

AMP 2022
ANNUAL MEETING & EXPO

General Information

Salutation
First Name
Last Name
Suffix
Degree
Certification
Position
Department
Institution/Company
Address
Suite
City
State/Province
Postal Code
Country
Fax
Email
Cell Phone
Work Phone
Phone Ext.

Please indicate if you have any additional needs:

- Physical
- Dietary
- Other

Meals are buffet-style with vegetarian options. AMP will contact you for details about your specific needs.

Registration Rates

Annual Meeting  By 11:59 pm ET 9/15  9/16-10/10
Regular Member  □ $495  □ $620
Technologist (Tech) Mbr  □ $375  □ $505
Trainee Member  □ $260  □ $320
Emeritus Member  □ $295  □ $295
Regular & Tech Non-Mbr  □ $750  □ $790
Trainee Non-Mbr*  □ $335  □ $370

*Non-AMP member trainees MUST submit a letter from their Program Director and/or supervisor/lab director.

Attendance Type

- In Person
- On Demand Only

Welcome Event (11/3 at 6:00pm)

- Meeting Registrant  □ $0
- Guest of Registered Attendee  □ $49

Add-ons

- On Demand Content  □ $99
- Reference Materials Forum  □ $0

Please Note

By registering for the AMP Annual Meeting & Expo, you are confirming you understand and agree to AMP’s policies. You can review the policies online at:

Payment Information

Balance Due $  □ MasterCard  □ Visa  □ AMEX  □ Discover  □ Check Enclosed*  □ Wire Transfer**

Credit Card#  □ Exp. Date  □ 3 or 4 Digit CVV#

Billing Address

Name on Card  Cardholder’s Signature

* Please mail checks to AMP at 6120 Executive Boulevard, Suite 700, Rockville, MD 20852
** Please email completed form to meetings@amp.org after wire transfer is completed
ATTENDEE SURVEY - PLEASE FILL AND RETURN

POSITION
Select the position that most closely applies:
- Administrative Director
- clinician (non-pathologist)
- Genetic Counselor
- Investor
- Laboratory Director
  (Includes Doctoral Scientists & Pathologists)
- Laboratory Manager
  (non-director, most work primarily NOT at bench)
- Laboratory Technician/Technologist
- Laboratory Supervisor
  (non-director, most work primarily at bench)
- Other Corporate Position
- Patient/Patient Advocate
- Payer
- President, CEO, Chair or Dean (of school, dept. org., or co.)
- Regular independent (or faculty) clinical staff (doctoral, post-training)
- Regulatory Staff
- Sales/Marketing Staff
- Trainee (Student/Resident/Fellow)
- Other

DEGREES
Select the position that most closely applies:
- Bachelors
- DDS
- DO
- DVM
- Masters
- MBBS
- MBCHB
- MD
- MNAMS
- PhD
- Other/NA

CERTIFICATIONS
- CCRP
- CLSp(MB)
- CT(ASCP)
- DABCC
- D(ABMM)
- DACVP
- FACMG
- FACP
- FRCPC
- HCLD
- HT(ASCP)
- MP(ASCP)
- MT(ASCP)
- PA(ASCP)
- SCT(ASCP)
- SI(ASCP)
- SV(ASCP)
- Other/NA

WORKPLACE SETTING
- Academic Center
- Community Hospital
- Commercial/Reference Lab
- Government
- Industry (diagnostics products manufacturing)
- Industry (other)
- Nonprofit Organization
- Private Lab
- Other

Are you a physician?  □ Yes  □ No

Is this your first AMP Annual Meeting?  □ Yes  □ No

Do you plan to purchase a product from an AMP Exhibitor;  □ In the next year
□ In the next two years
□ In the next five years
□ I do not plan to purchase a product from an AMP Exhibitor
□ Other

What influence do you have in the decision to purchase equipment or products for your institution?
□ I am a key decision maker
□ I am an influencer in the decision
□ I do not participate in these decisions

Year of Birth: ____________________________
Sex:  □ M  □ F  □ Other

AMP