

### Contact Information

SNMMI and/or ACNM Member #: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Degree(s): \_\_\_\_\_ Title: \_\_\_\_\_ Year Entered the Field: \_\_\_\_\_  
 Organization: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_  
 Email Address (required): \_\_\_\_\_ Phone (please include country code): \_\_\_\_\_

### Registration Rates

Registration Type	Early-Bird Registration Rates <i>(on/before December 6, 2018)</i>		Regular Registration Rates <i>(after December 6, 2018)</i>	
	Member	Nonmember	Member	Nonmember
Physician/Scientist/Industry	<input type="checkbox"/> \$445	<input type="checkbox"/> \$605	<input type="checkbox"/> \$495	<input type="checkbox"/> \$665
Technologist	<input type="checkbox"/> \$190	<input type="checkbox"/> \$240	<input type="checkbox"/> \$240	<input type="checkbox"/> \$290
Laboratory Professional*	<input type="checkbox"/> \$220	<input type="checkbox"/> \$275	<input type="checkbox"/> \$275	<input type="checkbox"/> \$330
Emeritus Member	<input type="checkbox"/> \$215		<input type="checkbox"/> \$230	
Resident/Scientist In-Training/Student**	<input type="checkbox"/> \$130	<input type="checkbox"/> \$160	<input type="checkbox"/> \$160	<input type="checkbox"/> \$185
Technologist Student**	<input type="checkbox"/> \$50	<input type="checkbox"/> \$75	<input type="checkbox"/> \$75	<input type="checkbox"/> \$100
<b>Events</b>				
<b>ACNM Awards Ceremony and Banquet</b> (Friday, January 18)	<input type="checkbox"/> Standard ____ x \$150 = \$ _____; Residents ____ x \$60 = \$ _____			
<b>Introduction to Radiological/Nuclear WMD Operations</b> (Saturday, January 19)	<input type="checkbox"/> FREE - Pre-registration is required on/before December 20.			

\*Resident and Student Nonmembers (Intern, Scientist In-Training, Medical/Graduate/Technologist Student) must submit a completed verification form (available at [www.snmmi.org/MWM2019](http://www.snmmi.org/MWM2019)). Technologist Student, Medical Student and Resident-In-Training fees do not include CE credit. Residents-In-Transition do receive CE Credit. Technologist Students wishing to claim CE credit must register as a Technologist.

Need auxiliary aids or services as identified in the Americans with Disabilities Act? Call 703.652.6789

### Payment Information *(Full payment is needed to process your registration.)*

**Grand Total:** \_\_\_\_\_

- Check – Please make check payable to SNMMI *(in U.S. Dollars)*  
 American Express  MasterCard  VISA

Last 4 Digits of Credit Card: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

*(please add full credit card # at the bottom of this page)*

Name as it appears on Card: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Cardholder Email Address: \_\_\_\_\_

### 3 Ways to Register

#### Online:

[www.snmmi.org/MWM2019](http://www.snmmi.org/MWM2019)

#### Fax:

703.709.9274

#### Mail:

SNMMI Meeting Services  
1850 Samuel Morse Drive  
Reston, VA 20190-5316

#### Registration Questions?

Call 703.652.6789

**Registration Cancellation/Change Policy:** Written cancellations received by midnight EST, Thursday, December 6, 2018 are refundable less a \$50 processing fee. Cancellations made by mail must be postmarked by December 6, 2018. After December 6, 2018 cancellations will not be refunded and are subject to the entire meeting fee. Please note that if you do not cancel and you do not attend the meeting, refunds will not be processed. Substitutions may be made at any time. SNMMI will not be held liable for cancellation fees to hotels, airlines or other means of transportation. **Phone cancellations are not accepted.** Send written cancellation or substitution to: [meetinginfo@snmmi.org](mailto:meetinginfo@snmmi.org)

Please enter full credit card number: \_\_\_\_\_