

# AMIA 2013 Annual Symposium

November 16 - 20, 2013 • Washington Hilton • Washington, DC

## REGISTRATION FORM

Dr  Mr  Ms

Last Name:  First Name:  Degree:

Title:

Dept:

Organization:

Address:

City/State/Zip:  Country:

E-mail:  Phone:  Fax:

### AMIA 2013 REGISTRATION FEES

#### Full Registration:

	Advance	Onsite
Author Member	___ \$735	___ \$835
Member	___ \$785	___ \$985
Author Non-member	___ \$935	___ \$1035
Non-member	___ \$985	___ \$1185
Student Member	___ \$395	___ \$495
Student Non-member	___ \$495	___ \$595

#### Daily Registration:

Member	___ \$390	___ \$465
Non-member	___ \$415	___ \$490

\_\_\_ Sun. Nov 17 \_\_\_ Mon. Nov 18 \_\_\_ Tue. Nov 19 \_\_\_ Wed. Nov. 20

Exhibition Hall Only: \$250

\_\_\_ Sun. Nov 17 \_\_\_ Mon. Nov 18 \_\_\_ Tue. Nov 19

#### Additional Events:

AMIA 2013 Networking Meet-up on Monday, November 18:

**Advance:** \_\_\_ \$35      **At the Door:** \_\_\_ \$50

Pre-symposium Events and Tutorials			
Sat, Nov 16		Sun, Nov 17	
Half-day			
T01	T02	T05	T06
		T07	T08
		T09	T10
		T11	T12
		T13	T14
Full-day			
T03	T04	WG01	WG02
		WG03	WG04
		WG05	
		WG06	WISH 2013
Friday, Nov 15, 8:00 am - 5:00 pm			
"ImageCLEFmed 2013 Medical Image Retrieval Workshop			
AMIA/MLA/AAHSL Meaningful Workshop			
		Members/Students	Non-Members
Half-day (Each)		___ \$95	___ \$150
Full-day		___ \$190	___ \$300
T04		___ \$395*	___ \$495*
ImageCLEFmed		___ \$60	___ \$60
AMIA/MLA/AAHSL		___ \$100	___ \$100
*T04 includes dinner			

FORM CONTINUES ON THE BACK

**AMIA MEMBERSHIP PAYMENT**

Complete information about AMIA membership is available on the AMIA Web site at [www.amia.org](http://www.amia.org).

Regular membership and MemberAdvantage afford registrants the opportunity to receive full member benefits of AMIA including member rates for the AMIA 2013 Annual Symposium.

	Regular	Student	Student plus JAMIA*
Add or renew your membership for 2013	___ \$300	___ \$40	___ \$115
Renew your membership for 2014	___ \$300	___ \$40	___ \$115
MemberAdvantage (July 2013 - Dec 2014)	___ \$450		

\* Student Rates with JAMIA include a discounted student subscription (on-line and print) for an additional \$75 fee

**PAYMENT INFORMATION**

Total Registration Fees	\$ _____
Total Tutorial Fess	\$ _____
Total Membership Fees	\$ _____
Total Other Fees	\$ _____
<b>Total to be Charged</b>	<b>\$ _____</b>

*Payment must be in U.S. dollars and payable through a U.S. bank. Please make all checks/money orders payable to: AMIA, 4720 Montgomery Lane, Suite 500, Bethesda, MD 20814. Credit card payments may be faxed to: 301-657-1296.*

\_\_\_\_\_ Please charge my credit card for the total amount

\_\_\_\_\_ Enclosed is a check for the total amount

\_\_\_\_\_ Visa \_\_\_\_\_ MasterCard \_\_\_\_\_ American Express \_\_\_\_\_ Discover

Credit Card/PO Number \_\_\_\_\_

Name as it appears on the card: \_\_\_\_\_

Expiration Date (mm,yyyy) \_\_\_\_\_ Signature \_\_\_\_\_