

# ASHP Pharmacotherapy Review and Recertification Registration Form



## ASHP Pharmacotherapy Review and Recertification Course

December 7–8, 2019 | Mandalay Bay Convention Center | Las Vegas, Nevada

### Register in advance and SAVE!

Register on or before October 24, 2019, to take advantage of special early bird discount rates.

Register at [www.ashp.org/boardreview2019](http://www.ashp.org/boardreview2019)

### REGISTRATION INFORMATION

Please provide home and business information and check preferred address for correspondence.

ASHP ID Number (if applicable): \_\_\_\_\_

Name: \_\_\_\_\_

FIRST MIDDLE LAST

Title: \_\_\_\_\_

Name for Badge: \_\_\_\_\_

Home Address: \_\_\_\_\_

STREET

Business Name: \_\_\_\_\_

CITY STATE ZIP

Business Address: \_\_\_\_\_

STREET CITY STATE ZIP

Daytime Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

CITY STATE ZIP

E-mail (required for meeting confirmation): \_\_\_\_\_

**For EEA exhibitors, sponsors and attendees:** In accordance with the GDPR (General Data Protection Regulation), by checking this box you are consenting to Orchid-Event's and ASHP's use of the information solely for the purpose of making and communicating to you about your reservations and related services.

### What is your primary position? (please check one)

- A  Director  
 Associate or Assistant Director  
 Clinical Coordinator  
 Other Supervisory Position
- B  Staff Pharmacist  
 Clinical Pharmacist–General  
 Clinical Pharmacist–Specialist  
 Faculty
- C  Resident/Fellow
- D  Student
- E  Technician  
 Physician  
 Nurse  
 Medication/Patient Safety Officer  
 Informatics/Technology Specialist  
 Other: \_\_\_\_\_

### ASHP'S LIVE PHARMACOTHERAPY REVIEW AND RECERTIFICATION COURSE

December 7–8, 2019 | 7:30 a.m. – 6:20 p.m.

Please select your member category and package below.

You must select between the **Review Package**, or the **Recertification Package**. Check only one.

**Review Package:** includes live course with educational materials (PDF); recorded course; core therapeutic module package; and practice exam

**Recertification Package:** includes live course with educational materials (PDF), recorded course, recertification assessment, and the 5 hour core therapeutic module for recertification package (for recertification only)

Please check one.	On or before October 24	October 25 and after	
<b>ASHP Member</b>			
Review Package	<input type="checkbox"/> \$550	<input type="checkbox"/> \$660	\$ _____
Recertification Package	<input type="checkbox"/> \$550	<input type="checkbox"/> \$660	\$ _____
<b>Nonmember</b>			
Review Package	<input type="checkbox"/> \$690	<input type="checkbox"/> \$830	\$ _____
Recertification Package	<input type="checkbox"/> \$690	<input type="checkbox"/> \$830	\$ _____
<b>Resident Member</b>			
Review Package	<input type="checkbox"/> \$275	<input type="checkbox"/> \$330	\$ _____
<b>Resident Nonmember</b>			
Review Package	<input type="checkbox"/> \$345	<input type="checkbox"/> \$415	\$ _____
<b>TOTAL FEES</b>			\$ _____

PCMCM19

### FOUR WAYS TO REGISTER

- ONLINE**  
[www.ashp.org/boardreview2019](http://www.ashp.org/boardreview2019) or [midyear.ashp.org](http://midyear.ashp.org)  
*(It's the quick and easy way to go!)*
- CALL TOLL-FREE 1-866-279-0681**, Mon.–Fri. 8 a.m.–6 p.m. EST  
 International: **001-301-664-8700**
- FAX** registration form to **1-301-657-1251**
- MAIL** registration form with check or money order payable to ASHP.  
*Checks must be drawn on a U.S. bank in U.S. funds.*  
**American Society of Health-System Pharmacists**  
**P.O. Box 38069, Baltimore, MD 21297-8069**

### REGISTRATION CANCELLATION AND REFUNDS

All course cancellations are subject to a \$75 handling charge.  
 No refunds will be offered after November 25, 2019.

### METHOD OF PAYMENT

- Enclosed is my check or money order made payable to ASHP and drawn on a U.S. Bank.**
- Enclosed is my U.S. purchase order number # \_\_\_\_\_.**  
**Please issue invoice.**
- Charge \$ \_\_\_\_\_ to my:**  MasterCard  VISA  
 AmEx  Discover

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Signature: \_\_\_\_\_

By authorizing this charge, I certify that the above registration information is true and correct, and agree to be responsible for any additional charges.

*Please Note: Payments to ASHP are not deductible as charitable contributions for federal income tax purposes. However, they may be deductible under other provisions of the Internal Revenue Code. Only additional donations to the ASHP Research and Education Foundation are tax deductible.*

Registration with any meeting or event associated with the 2019 ASHP Midyear Clinical Meeting and Exhibition implies consent and understanding of ASHP's Code of Conduct Policy and Photo Waiver. To read these documents visit, [www.ashp.org/mcmregister](http://www.ashp.org/mcmregister).