



**REGISTRATION FORM 2021**

Return form to: ISMRM, P.O. Box 45690, San Francisco, CA 94145-0690, USA • Fax: +1 510 841 2340

Register online: [www.ismrm.org/21](http://www.ismrm.org/21)

**STEP 1: BADGE & CONTACT INFORMATION:**

HONORIFIC:  M.D.,  M.D. Candidate,  Ph.D.,  Ph.D. Candidate,  Professor,  RT,  Other: \_\_\_\_\_

Professional Classification:  Clinical Science  Basic Science

Gender: \_\_\_\_\_  Prefer Not to Say      Date of Birth: (optional) \_\_\_\_\_      Customer ID # \_\_\_\_\_

Last/Surname: \_\_\_\_\_      First/Given Name: \_\_\_\_\_      Middle Name: \_\_\_\_\_

National Provider ID #: (USA MDs only): \_\_\_\_\_

Institution: \_\_\_\_\_

City/State/Province/Country: \_\_\_\_\_

This address is for:  Work  Home      Is this new contact information?  Yes  No

Street Address: \_\_\_\_\_      City: \_\_\_\_\_      State/Province: \_\_\_\_\_      Postal/Zip Code: \_\_\_\_\_      Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_      Work Phone: \_\_\_\_\_      Mobile Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**STEP 2: EVENT-SPECIFIC INFORMATION:**

The ISMRM makes its attendee list available to our exhibitors prior to the meeting. If you DO wish to be included, check here:

Is this your first time at an ISMRM or SMRT Annual Meeting?:  Yes  No

How did you hear about this meeting?:

I am an Abstract Presenter  Colleague  Email  Facebook  Flyer  Website  Journal Ad  LinkedIn  Twitter  Other: \_\_\_\_\_

**STEP 3: PROGRAM OPTIONS AND FEES:**      *The extended early registration deadline is 21 April 2021.*

Registrant Type	ISMRM Full	ISMRM Trainee/Associate/Emeritus SMRT Member/Technologists/Radiographers	Notes
Member	Early: <input type="checkbox"/> \$400.00USD Late: <input type="checkbox"/> \$500.00USD	Early: <input type="checkbox"/> \$250.00USD Late: <input type="checkbox"/> \$350.00USD	* To qualify for an ISMRM or SMRT Member rate, your 2021 membership dues must be paid.
Non-Member	Early: <input type="checkbox"/> \$700.00USD Late: <input type="checkbox"/> \$800.00USD	Early: <input type="checkbox"/> \$350.00USD Late: <input type="checkbox"/> \$450.00USD	** Non-member trainees & technologists/radiographers must provide verification of their current status to receive the reduced fee.

**STEP 4: CONFIRM YOUR REGISTRATION FEE:**      TOTAL REGISTRATION FEE: US \$

**STEP 5: NONMEMBER TRAINEE and NOMEMBER TECHONOLGIST/RADIOGRAPHER VERIFICATION:**

(\*Required for all trainees, postdocs and technologists who are registering as non-members.)

Supervisor's Name: \_\_\_\_\_ Institution Name: \_\_\_\_\_

Supervisor's Phone: \_\_\_\_\_ Supervisor's E-mail: \_\_\_\_\_

**STEP 6: PAYMENT INFORMATION: (Purchase orders will not be accepted as payment.)**

Check (in US dollars drawn on a US bank made payable to ISMRM):      Check Number: \_\_\_\_\_      Amount: \$ \_\_\_\_\_

To pay by credit card, please complete below:  Visa  MasterCard  AMEX  Discover

Cardholder's Name: (Required) \_\_\_\_\_

Credit Card #: (Required) \_\_\_\_\_      Expiration Date: (Required) \_\_\_\_\_

Cardholder Signature: (Required) \_\_\_\_\_      Credit Card Security Code: (Required) \_\_\_\_\_

Billing Address: (Required) \_\_\_\_\_      Billing Zip/Postal Code: (Required) \_\_\_\_\_

All registration cancellation requests must be received via email only at [registrar@ismrm.org](mailto:registrar@ismrm.org) by 28 April 2021. Refunds are subject to a 20% cancellation fee. There will be no refunds after the 28 April 2021 deadline. Registrations are not transferable. No attendee may substitute for another. Absolutely no exceptions will be made.