2nd World Consensus Conference on BIA-ALCL (D122623)
November 6-7, 2020
The University of Texas MD Anderson Cancer Center

THE UNIVERSITY OF TEXAS MD Anderson Cancer Center
Making Cancer History®

Conference Registration:

Last Name	First	MI Highest Degree
Department (include box no.)		Specialty
Institution		Physician ❑ Yes ❑ No
Street	City	State/Foreign Country/Zip or Mail Code
E-mail Address		
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Emergency Contact		Phone (with area code)

PAYMENT OPTIONS:
Mail check or money order (*payable through U.S. banks only*) made payable to: *UT MD Anderson Cancer Center*
Mail: UT MD Anderson Cancer Center, CME/Conference Management-Unit 1781, 1515 Holcombe Blvd, Houston, Texas 77030
FAX: 713-794-1724

Charge the following: ❑ VISA ❑ MasterCard ❑ American Express

Card # Expiration Date and CVV #	Authorized Signature REQUIRED for credit card
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MD Anderson Interdepartmental Transfer (IDT) No.

Business Unit	Department	Fund Group	Fund	Fund Type	PC BU	Project	Activity

Authorized Signature REQUIRED for IDT	MD Anderson Employee ID No. (REQUIRED)
IDT Approver Name (First/Last) please print	IDT Approver E-mail

REGISTRATION FEES

❑ **Physicians (MD, PhDs) before 10/06/2020 - $200.00**
❑ **Physicians (MD, PhDs) after 10/06/2020 - $260.00**
❑ **Healthcare Professionals (Nurses/PAs, etc.) before 10/06/2020 - $70.00**
❑ **Healthcare Professionals (Nurses/PAs, etc.) after 10/06/2020 - $100.00**

Diagnosed BIA-ALCL Patient Forum (Diagnosed Patients Only)

❑ **Patients - $50.00 (Diagnosed Patients Only)**
❑ **Caregivers - $50.00**
❑ **Advocates - $50.00**
❑ **Trainee (Students, Residents, Fellows) FREE**
❑ **Pearl Donor $100 (donation in addition to registration fee)**