



## REGISTRATION FORM

### ACT 35<sup>th</sup> ANNUAL MEETING Orlando, Florida November 9–12, 2014

Online registration is available at [www.actox.org](http://www.actox.org).

PLEASE PRINT OR TYPE

(Required: Please check the appropriate box)

☐ ACT Member ☐ Nonmember

First Name/Middle Initial: \_\_\_\_\_

Last Name: \_\_\_\_\_ Professional Degrees and Certification(s): \_\_\_\_\_

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

Department: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov/State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Area Code/Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

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

Address where you would like your badge mailed if different from above: \_\_\_\_\_

#### REGISTRATION FEES

	Registration (Received by October 8)	Late Registration (October 9–November 12)	
ACT Member	\$500	\$600	\$ _____
Nonmember	\$750	\$850	\$ _____
Student	\$ 75	\$175	\$ _____
One-Day Member	\$350	\$450	\$ _____
One-Day Nonmember	\$450	\$550	\$ _____
One-Day Student	\$ 40	\$140	\$ _____
Exhibitor	\$ 0	\$ 0	\$ _____

Registration includes ACT Awards Luncheon and Monday evening Poster Reception.

#### CONTINUING EDUCATION: SUNDAY, NOVEMBER 9

Sunday, November 9; Preregistration is required. Seating is limited.

8:00 AM–2:30 PM (Box lunch is provided with Short Course fee)

☐ Study Director Training Short Course

8:00 AM–11:30 AM (select one)

- ☐ CE 1: Best Practices in Toxicologic Pathology
- ☐ CE 2: Regulatory Toxicology—In the FDA and Beyond
- ☐ CE 3: Nonclinical Testing and Solutions
- ☐ CE 4: Interpreting Adverse Clinical and Anatomic Pathology Results: Putting It all Together

1:00 PM–4:30 PM (select one)

- ☐ CE 5: Toxicology and Pathology of the Respiratory System
- ☐ CE 6: QSAR—A Tool for the Toxicologist
- ☐ CE 7: Managing Anti-Drug Antibody Responses during Biologics Drug Development
- ☐ CE 8: Metabolites: Guidance and Considerations in Drug Development

	Registration (Received by October 8)	Late Registration (October 9–November 12)	# of Courses (1 or 2)	
CE Member/Nonmember	\$250 /per course	\$350 /per course	_____	\$ _____
CE Student	\$125 /per course	\$175 /per course	_____	\$ _____
Short Course Member/Nonmember	\$350 /per course	\$450 /per course	_____	\$ _____
Short Course Student	\$225 /per course	\$275 /per course	_____	\$ _____

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**ACT REGISTRATION FORM • 35th Annual Meeting • November 9–12, 2014 • Orlando, Florida**

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

**SPECIAL EVENTS**

<b>Golf Tournament</b>	<input type="checkbox"/> Yes, I would like to attend—Saturday, November 8, 12:00 Noon–4:30 PM. \$125 per person. Limited playing slots available.	\$ _____
<b>Welcome Reception</b>	<input type="checkbox"/> Yes, I would like to attend—Sunday, November 9, 6:30 PM–8:30 PM. \$50 per person. Limited number of tickets are available.	\$ _____
<b>ToxTrot</b>	<input type="checkbox"/> Yes, I would like to attend—Tuesday, November 11, 6:30 AM–7:30 AM. Free Event.	\$ _____

**DIETARY NEEDS AND SPECIAL SERVICES**

ACT recognizes individuals may have special dietary requirements. Although the College cannot guarantee that these needs will be met, the College wishes to try to accommodate these needs. Please indicate below if you have any special dietary needs. If you require special services, please describe on the line(s) below or contact ACT Headquarters with your request.

- ☐ Gluten free    ☐ Vegetarian meals only  
☐ Other \_\_\_\_\_

**ATTENDEE OPT-OUT LIST OPTION**

ACT will publish an online Annual Meeting Attendee List, including physical and email addresses, for all meeting attendees. This will be password protected.

- ☐ Check here if you do not wish to be listed in the online password protected attendee list provided to all registrants.

**MEMBERSHIP RENEWAL FOR 2014 (late fees may apply)**

- ☐ Full Membership—\$125    ☐ Associate Membership—\$125    ☐ Student—\$0    ☐ Emeritus—\$0

**METHOD OF PAYMENT**

All registrations submitted by hard copy or fax will be processed online by ACT staff.

Registration Fees \$ \_\_\_\_\_  
 Continuing Education \$ \_\_\_\_\_  
 Special Events \$ \_\_\_\_\_  
 Membership Renewal \$ \_\_\_\_\_  
**TOTAL DUE** \$ \_\_\_\_\_

- ☐ Check or Money Order #: \_\_\_\_\_  
☐ US Government Purchase Order #: \_\_\_\_\_ (US Government PO Form must be attached)  
☐ American Express    ☐ MasterCard    ☐ VISA

Credit Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

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

Cardholder's Printed Name: \_\_\_\_\_

**REFUND POLICY**

A \$75 processing fee will be charged for cancellation before September 9, 2014.  
 50% refund if canceled September 9, 2014–October 8, 2014. No refunds beginning October 9, 2014.

**ACT Annual Meeting registrants grant ACT permission to reproduce, copy, and publish photographs taken at the Annual Meeting unless written notification by the registrant stating otherwise is submitted to the ACT Headquarters office prior to the Annual Meeting or while registering on-site.**

**All payments must be in US currency. No phone registrations will be accepted. Faxes for credit cards only: 703.438.3113  
 Payment by check, send with Registration Forms to: ACT Headquarters • 1821 Michael Faraday Drive, Suite 300 • Reston, VA 20190**