

# SLEEP 2012 REGISTRATION FORM



**SLEEP 2012  
BOSTON**  
JUNE 9-13

## Section I - Registration Information (Please print clearly)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
 Company: \_\_\_\_\_ Department: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email Address: \_\_\_\_\_  
 On-site Mobile Number: \_\_\_\_\_ NPI Number (required for MDs only): \_\_\_\_\_

Degree(s) please check:  MD  PhD  RST  MD/PhD  CPSGT  RPSGT  DO  DDS  RN  Other \_\_\_\_\_

### Primary Specialty: please circle

Sleep                      Neurology                      Pediatrics                      Psychology                      Internal Medicine                      Neurophysiology  
 Psychiatry                      Pulmonary Medicine                      Family Medicine                      ENT                      Nursing                      Other

Are you a resident physician?  Yes  No

### Special Services:

Please check here if you require special services to fully participate at the meeting. Attach a written description of your needs.

## Section II – General Session Registration

| Registration Type  | on or before 4/25 | 4/26-5/30 |
|--|-------------------|-----------|
| <input type="checkbox"/> AASM/SRS/Dual Individual Member*                        | \$275             | \$350     |
| <input type="checkbox"/> Nonmember   | \$475             | \$550     |
| <input type="checkbox"/> Resident/Postdoctoral Member                            | \$165             | \$165     |
| <input type="checkbox"/> Resident/Postdoctoral Nonmember - complete section II.b | \$210             | \$210     |
| <input type="checkbox"/> Student/Predoctoral Member                              | \$85              | \$85      |
| <input type="checkbox"/> Student/Predoctoral Nonmember - complete section II.b   | \$125             | \$125     |
| <input type="checkbox"/> AAST Member* - includes CECs for AAST Meeting           | \$220             | \$295     |
| <input type="checkbox"/> Technologist (AAST Nonmember) - does not include CECs   | \$300             | \$375     |
| <input type="checkbox"/> Guest (Family members only)                             | \$100             | \$100     |

\*Registrants must have AASM, SRS, or AAST individual membership status at the time of registration.

May 30, 2012, is the pre-registration deadline; increased fees apply to on-site registrants.

**Section II Total:**  
\$ \_\_\_\_\_

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

**Section II.b.** - To register as a student nonmember, you must currently be a student enrolled in a formal training program. Students in the field of sleep technology are not eligible for this registration category.

By checking this box, I am verifying that I am currently a student enrolled in a formal training program. I give permission to contact my program director to verify my student status. My program director's name and e-mail are listed below.

Program Director's Name: \_\_\_\_\_ Program Director's Email Address: \_\_\_\_\_

**Ticketed Sessions:** All registrants must complete Section II – General Session Registration prior to registering for any of the following sections. Postgraduate courses, meet the professor sessions, lunch debate sessions and the networking reception are ticketed sessions and have limited seating. A list of sold out sessions is available at [www.sleepmeeting.org](http://www.sleepmeeting.org). A list of AAST sold out sessions is available at [www.aastweb.org](http://www.aastweb.org).

## Section III - Postgraduate Course Registration - There is no limit to the number of courses for which you can register

### Saturday, June 9

Full-day Courses                      \$150 Member, \$200 Nonmember                       C01  C02  C03  C04

Half-day Courses                      \$85 Member, \$150 Nonmember                       C05  C06

### Sunday, June 10

Full-day Courses                      \$150 Member, \$200 Nonmember                       C07  C08  C09  C10

Half-day Courses                      \$85 Member, \$150 Nonmember                       C11  C12

### Sunday, June 10

AAST Full-day Courses                      \$130 Member, \$185 Nonmember                       A01  A02  A03  A04

**Section III Total:**  
\$ \_\_\_\_\_

**Section IV - Meet the Professor Registration - Fee per session: \$45 Member, \$55 Nonmember**

**Monday, June 11** M01- M08 Choice 1: Course #M \_\_\_\_ Choice 2: Course #M \_\_\_\_ Choice 3: Course #M \_\_\_\_  
**Tuesday, June 12** M09- M16 Choice 1: Course #M \_\_\_\_ Choice 2: Course #M \_\_\_\_ Choice 3: Course #M \_\_\_\_  
**Wednesday, June 13** M17- M23 Choice 1: Course #M \_\_\_\_ Choice 2: Course #M \_\_\_\_ Choice 3: Course #M \_\_\_\_

**Section IV Total:**  
\$ \_\_\_\_\_

**Section V - Lunch Debate Registration - Fee per session: \$40 Member, \$50 Nonmember**

**Monday, June 11**  L01: Does the MSLT Provide a Useful Measure of Daytime Sleepiness in Clinical Practice?  
**Tuesday, June 12**  L02: Are Periodic Limb Movements during Sleep Dangerous?  
**Wednesday, June 13**  L03: REM Sleep and Dreaming: Cause or Consequence of Emotions?

**Section V Total:**  
\$ \_\_\_\_\_

**Section VI - Credits**

**SLEEP 2012 Credits**

Continuing Medical Education (CME) Credit for Physicians \$20 Member, \$35 Nonmember  
 Continuing Education (CE) Credit for Psychologists \$40 Member, \$40 Nonmember  
 Continuing Education (CE) Contact Hours for Nurse Practitioners \$20 Member, \$35 Nonmember  
 Letter of Attendance for Others \$20 Member, \$35 Nonmember

**AAST 34<sup>th</sup> Annual Meeting Credits**

Continuing Education Credits (CEC) for Technologists attending AAST 34<sup>th</sup> Annual Meeting\* \$20 Nonmember

\*CEC fee is included in the General Registration for AAST members only.

**Section VI Total:**  
\$ \_\_\_\_\_

**Section VII - SLEEP 2012 Networking Reception**

Friends of the Foundation (check one)  10 tickets = \$2,500  20 tickets = \$5,000 or  30 tickets = \$10,000  
 Individual Ticket \$50 x \_\_\_\_\_ = \$ \_\_\_\_\_

**Section VII Total:**  
\$ \_\_\_\_\_

**Please total each section on both sides of this registration form.**

**Grand Total:**  
\$ \_\_\_\_\_

Payment in full must accompany registration in order for it to be processed. Payment may be in the form of a check drawn on a U.S. bank or MasterCard/Visa/American Express. Registrations will be returned unprocessed if proper payment is not provided or form is incomplete. A \$50 administrative fee will be withheld on cancellations postmarked on or before Wednesday, May 23, 2012. No refunds are possible after this date. The final date to pre-register is Wednesday, May 30, 2012. Registration forms received after this date will be processed on site at the on-site registration desk. Registration confirmations will be e-mailed approximately 2 business days after the receipt of your registration.

By submitting this registration form, the registrant/payer agrees to abide by the terms and conditions listed in the preliminary program.

**Payment Method**

Check: Make payable to APSS  Credit Card (check one):  MasterCard  Visa  American Express  
Card# \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Validation Code\* \_\_\_\_\_ Cardholder Name \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Please choose ONE of the following methods to submit a registration form (registrations are not accepted by phone):**

**Online** (credit card only): [www.sleepmeeting.org](http://www.sleepmeeting.org) **Fax** (credit card only): (630) 737-9789 **Mail** (check or credit card): APSS, Attn: Meeting Department  
2510 North Frontage Road  
Darien, IL 60561