

## 1. CONTACT INFORMATION

Name \_\_\_\_\_  
 Title \_\_\_\_\_  
 Facility \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State/Province \_\_\_\_\_  
 Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_  
 Phone \_\_\_\_\_ Ext \_\_\_\_\_  
 Fax \_\_\_\_\_  
 Email \_\_\_\_\_  
 (Required to confirm registration)

## FOUR EASY WAYS TO REGISTER



Mail this completed form to:  
**Client Services**  
**OR Business Management Conference**  
**9211 Corporate Blvd, 4th Floor**  
**Rockville, MD 20850**



Web:  
**www.ormanager.com/managementconference**



Phone: **1-888-707-5814**



Fax this completed form to:  
**301-309-3847**

*When faxing or mailing, please photocopy the form for each registrant.*

## 2. REGISTRATION & FEES

Package	Early Bird Rate (Ends Sept. 20, 2019)	Advanced Rate (Ends Dec. 18, 2019)	Regular Rate
<input type="checkbox"/> Conference Only	\$995	\$1,095	\$1,195
<input type="checkbox"/> Pre-Conference Workshop + Conference	\$1,195	\$1,295	\$1,595
<input type="checkbox"/> Pre-Conference Workshop Only	\$595	\$695	\$795

Register with at least 2 or more people and get 15% off additional registrations in your group with VIP code **GROUP**

## 3. PAYMENT INFORMATION

- Check Enclosed    **PO/Bill Me**  
 Credit Card:    Visa    MasterCard    American Express    Discover

Access Intelligence Federal Tax ID#: 52-2270063

Card Number \_\_\_\_\_ Signature \_\_\_\_\_  
 Expiration Date \_\_\_\_\_ CVC # \_\_\_\_\_ Name as Shown on Card \_\_\_\_\_

## 4. CREATE YOUR PROFILE

### 1. How many years have you attended OR Business Manager Conference?

- First-Time Attendee  
 2 years  
 3 years  
 4 years  
 5 years

### 2. What best describes where you are employed?

- Ambulatory Surgery Centers  
 (Free-standing, In-hospital or Office-based)  
 Academic Hospital  
 Community Hospital  
 Tertiary Hospital  
 VA Hospital  
 Clinic  
 Manufacturer/Vendor  
 Other \_\_\_\_\_

### 3. What best represents your job position?

- OR, Nursing, Surgical, Perioperative  
 Manager  
 Director  
 VP  
 Admin Specialist/Director  
 Coordinator  
 Business Manager  
 Educator/Staff Development  
 OR Industry  
 Consultant  
 Student  
 Sales/Marketing Representative  
 Other \_\_\_\_\_

### 4. What role(s) do you play in purchasing new products and services at your institution? (Please check all that apply)

- Recommend new products  
 Specify suppliers to evaluate products and services  
 Member of purchasing/evaluation committee  
 Final decision making authority on purchases  
 I do not play a role in purchasing decisions

Presented by **OR Manager**

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[www.ormanager.com/managementconference](http://www.ormanager.com/managementconference)