

Official Congress Registration Form

Please complete this form or **quickly and conveniently register online at www.ons.org**. After **April 2**, you must register on site.

OFFICE USE ONLY	
Date Rec'd _____	_____
Amount _____	_____
Check #/Type _____	Code CO9PDF

1. Your Information

Last _____ First _____ MI _____

ONS ID# _____ Job title _____

Work affiliation _____

Work address _____

City _____ State _____ Zip _____

Home address _____

City _____ State _____ Zip _____

Phone (H) _____ (O) _____ Fax _____

Email _____

Check here if you do not want the above address/e-mail address updated for future communication with ONS, ONCC, ONSEdge, and the ONS Foundation.

2. NEW IN 2009 – OPTIONAL PRINT VERSION OF SYLLABUS (see inside for details)

You can quickly and conveniently access syllabus materials in the Congress area of www.ons.org . If you'd like a print version, you must purchase it when you register or do so on site.	Member Price	Nonmember Price
ONS 34th Annual Congress Conference Syllabus (print version)	<input type="checkbox"/> \$20	<input type="checkbox"/> \$30

3. Optional Preconference Programming (see www.ons.org for details)

<i>Space is limited. Please select only one.</i>	Member Price	Nonmember Price
Chemotherapy/Biotherapy Course • April 28 from 8 am-5 pm and April 29 from 8 am-5 pm	<input type="checkbox"/> \$299	<input type="checkbox"/> \$395
Treatment Basics: Antineoplastic Therapy in Nononcology Settings • April 29 from 8 am-12:30 pm	<input type="checkbox"/> \$130	<input type="checkbox"/> \$220
ONS Leadership Short Course on Professional Abilities • April 29 from 8 am-4:30 pm	<input type="checkbox"/> \$199	<input type="checkbox"/> \$295
Radiation Therapy Course • April 29 from 8 am-5 pm	<input type="checkbox"/> \$200	<input type="checkbox"/> \$260

4. Optional Pre-Congress Sessions (see www.ons.org for details)

Pre-Congress sessions will be held Wednesday, April 29. Space is limited. Please register early to ensure your seat in the course.

<i>Please select only one.</i>	Member	Nonmember
What Every Oncology Nurse Needs to Know About Stem Cell Transplant (full day; 9 am-6 pm)	<input type="checkbox"/> \$140	<input type="checkbox"/> \$200
Oncology Emergencies: A Case-Based Approach (full day; 9 am-6 pm)	<input type="checkbox"/> \$140	<input type="checkbox"/> \$200
Pharmacotherapeutics of Modern Pain and Symptom Management (full day; 9 am-6 pm)	<input type="checkbox"/> \$140	<input type="checkbox"/> \$200
Evidence-Based Practice: Lymphedema Risk Reduction and Management (half day; 2-6 pm)	<input type="checkbox"/> \$85	<input type="checkbox"/> \$135
Lassoing the Critical Elements of Nursing Leadership (half day; 2-6 pm)	<input type="checkbox"/> \$85	<input type="checkbox"/> \$135
Navigating the System: Training Nurses to Teach Survivors and Their Family Caregivers (half day; 2-6 pm)	<input type="checkbox"/> \$85	<input type="checkbox"/> \$135
The Many Hats of the Oncology Nurse – Applying Clinical Trials to Everyday Practice (half day; 2-6 pm)	<input type="checkbox"/> \$85	<input type="checkbox"/> \$135

The ONS photographer will be present at this conference, and registration implies registrant's consent to be photographed. Photographs may be used in ONS publications and promotional materials.

5. Choose Your Registration Category

Register by March 19 to save \$100!	EARLY-BIRD REGISTRATION (by March 19)	ADVANCED REGISTRATION (March 20-April 2)	FINAL/ON-SITE REGISTRATION (after April 2)	DAILY REGISTRATION
Current Member/Associate Member	<input type="checkbox"/> \$425	<input type="checkbox"/> \$500	<input type="checkbox"/> \$525	<input type="checkbox"/> 4/30 \$180 <input type="checkbox"/> 5/1 \$180 <input type="checkbox"/> 5/2 \$180 <input type="checkbox"/> 5/3 \$90
New Member Join today to take advantage of member pricing! (See section 5 for details.)	<input type="checkbox"/> \$425	<input type="checkbox"/> \$500	<input type="checkbox"/> \$525	<input type="checkbox"/> 4/30 \$180 <input type="checkbox"/> 5/1 \$180 <input type="checkbox"/> 5/2 \$180 <input type="checkbox"/> 5/3 \$90
Nonmember	<input type="checkbox"/> \$535	<input type="checkbox"/> \$610	<input type="checkbox"/> \$650	<input type="checkbox"/> 4/30 \$220 <input type="checkbox"/> 5/1 \$220 <input type="checkbox"/> 5/2 \$220 <input type="checkbox"/> 5/3 \$110
Students, Senior RNs, or Physically Challenged RNs	<input type="checkbox"/> \$212	<input type="checkbox"/> \$250	<input type="checkbox"/> \$262	<input type="checkbox"/> 4/30 \$90 <input type="checkbox"/> 5/1 \$90 <input type="checkbox"/> 5/2 \$90 <input type="checkbox"/> 5/3 \$45

Students must submit verification from dean indicating full-time student status with this registration form; Senior RNs must be at least 62 years old; Those who meet the criteria for active membership but are on full-time disability may register as physically challenged RNs.

6. Attention, Nonmembers: Join ONS Today!

Nonmembers: Join today to take advantage of "New Member" pricing in section 3. If you do not wish to become an ONS member, then you must select the "Nonmember" registration fee in section 4.	Price
Active Member (only RNs are eligible)	<input type="checkbox"/> \$102
Associate Member (non-RN healthcare professionals are eligible)	<input type="checkbox"/> \$102
Student Member (only full-time students are eligible)	<input type="checkbox"/> \$51
Senior RN (at least 62 years old)	<input type="checkbox"/> \$62
Physically Challenged RN (those who qualify for active membership and receive long-term disability benefits)	<input type="checkbox"/> \$51
Choose your special interest group (see reverse for details): _____	FREE!

7. Your Payment Information

Method of Payment	Amount Due	
	<input type="checkbox"/> Check (made payable to Oncology Nursing Society) Check # _____	Sec. 2
<input type="checkbox"/> ONS gift certificate # _____ (include w/registration form)	Sec. 3	\$
<input type="checkbox"/> Credit card <input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> AmEx <input type="checkbox"/> Discover Exp. date _____	Sec. 4	\$
Card number _____	Sec. 5	\$
Name as it appears on card (please print) _____	Sec. 6	\$
Cardholder signature _____	Total	\$
Cardholder phone _____		

8. Submit Your Registration Today! Four Easy Ways to Register!

Online: www.ons.org

Fax: 877-369-5497 (toll free, U.S. & Canada)

412-859-6162 (fax)

(faxed registrations require credit card payment)

Mail: Oncology Nursing Society

P.O. Box 3500

Pittsburgh, PA 15230-3500

Phone: 866-257-4ONS or 412-859-6100