

Register online at [asds.net/AnnualMeeting](https://asds.net/AnnualMeeting)

Complete a separate form for every registrant – **Print clearly**


Attendee Name \_\_\_\_\_ ASDS Member ID# \_\_\_\_\_

Address NOTE: Exhibitors will receive attendee mailing addresses – use your preferred business address rather than your home address. \_\_\_\_\_

City \_\_\_\_\_ State / Region \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Phone (include country code outside U.S.) \_\_\_\_\_ Mobile (include country code outside U.S.) \_\_\_\_\_

Email (for ASDS communication only) \_\_\_\_\_ Fax (include country code outside U.S.) \_\_\_\_\_

  **ADA / SPECIAL ASSISTANCE** for accessibility requirements, please email [education@asds.net](mailto:education@asds.net).

**Payment Information (U.S. dollars)**

**TOTAL MEETING FEE: \$** \_\_\_\_\_

**CREDIT CARDS:** Fax completed forms to 847-956-0999

Visa     MasterCard     American Express     Discover

Credit Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_ Billing Address ZIP \_\_\_\_\_

Authorized Signature \_\_\_\_\_ CVV \_\_\_\_\_

There will be no refunds for the virtual event at this time. Email questions to [education@asds.net](mailto:education@asds.net).

By virtue of registration, ASDS Annual Meeting attendees agree to abide by the Meeting Policies and Code of Conduct, and that photos taken by ASDS will be utilized in future meeting promotions.

**CHECKS** (Allow 7 business days for processing)  
Send checks payable in U.S. dollars to:  
American Society for Dermatologic Surgery  
5550 Meadowbrook Drive, Suite 120  
Rolling Meadows, IL 60008-3805

Meeting Registration Categories and Fees	VIRTUAL Only
<b>ASDS Members</b> (Includes Adjunct Associate, Corresponding Fellows, Honorary Affiliate and Honorary Fellow)	<b>\$449</b>
<b>ASDS Life Members</b>	<b>\$349</b>
<b>Non-member Dermatologists</b> <i>Proof of board certification from the American Board of Dermatology, the Osteopathic Board of Dermatology, the Royal College of Physicians and Surgeons of Canada or the international equivalent must accompany your registration.</i>	<b>\$749</b>
<b>Post-Residency Trainees</b>	<b>\$389</b>
<b>Residents</b> <i>Includes graduating class of 2021.</i>	<b>\$289</b>
<b>International Residents</b> <i>Graduating class of 2021; Letter from dermatology program director must accompany your registration.</i>	<b>\$209</b>
<b>ADAM Members</b> <i>Includes admission to Virtual Exhibit Hall, receptions and all unrestricted sessions.</i> Employing Dermatologist's Name _____	<b>\$129</b>
<b>Administrative Staff</b> <i>Includes admission to Virtual Exhibit Hall, receptions and all unrestricted sessions.</i> Employing Dermatologist's Name _____	<b>\$129</b>
<b>Clinical Staff: MAs, PAs, RNs, Surgical Assistants</b> <i>Includes admission to Virtual Exhibit Hall, receptions and all unrestricted sessions.</i> Employing Dermatologist's Name _____	<b>\$129</b>
<b>Medical Students</b> <i>Includes admission to Virtual Exhibit Hall, receptions and all sessions, excluding workshops. Letter from your medical school dean must accompany your registration</i>	<b>\$159</b>
<b>Guests</b> (Spouse / Companion only) <i>Must be a guest of a registrant from a category above. Includes admission to Virtual Exhibit Hall and receptions. Attendance at scientific sessions is not permitted.</i>	<b>\$229</b>
Name _____	