

# Advance Registration and Hotel Reservation Form

For fast, convenient registration and updated housing information, register at [www.acc.org](http://www.acc.org)!

ACC.07 registration includes access to ACC.07 events only. You must register for i2 Summit to participate in both i2 Summit and ACC.07 events.

Please complete and submit page 1 and 2 of the registration form or your registration will not be accepted.

## 1. Name/Mailing Address

First/Given Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last/Family Name \_\_\_\_\_

Institution/Hospital/Office \_\_\_\_\_ ACC Customer Number \_\_\_\_\_

Address  Home  Office \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Country \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

(all meeting confirmations will be e-mailed or faxed)

## 2. Badge Information (Information will appear on badge exactly as written.)

Name \_\_\_\_\_ Degree \_\_\_\_\_

City \_\_\_\_\_ State/Country \_\_\_\_\_

## 3. Family Member

First/Given Name \_\_\_\_\_ Last/Family Name \_\_\_\_\_

4.  First-Time Attendee

## 6. Hotel Reservation (Individuals requiring hotel reservations **must register** for ACC.07 and/or i2 Summit.)

Give priority to:  Rate  Location  Specific Hotel/Chain

Arrival: Day \_\_\_\_\_ March \_\_\_\_\_, 2007 Departure: Day \_\_\_\_\_ March \_\_\_\_\_, 2007

1st Choice \_\_\_\_\_ 3rd Choice \_\_\_\_\_

2nd Choice \_\_\_\_\_ 4th Choice \_\_\_\_\_

Check:  Single (1 person)  One-Bedroom Suite (sleeping room and parlor)

Double (2 persons)  Two-Bedroom Suite (sleeping rooms and parlor)

Special Requests \_\_\_\_\_

Note: Hotel rooms are limited. Please check one of the following, "If none of my choices is available..."

Do not assign me a room.

Assign me a room at any available hotel.

No hotel required; staying at/sharing with \_\_\_\_\_.

## 7. Special Needs Audio Mobile Visual; please describe: \_\_\_\_\_

Please complete and submit page 1 and 2 of the registration form or your registration will not be accepted.

Remove my name from mailing lists rented by the ACC.

## 5. Registrant Profile

This information must be complete or registration will not be accepted.

### A. Medical Specialty (check one)

- A01  Adult Cardiology
- A02  Pediatric Cardiology
- A03  Cardiovascular Surgery
- A04  Internal Medicine
- A05  Family/General Practice
- A06  Radiology
- A07  Nuclear Medicine
- A08  Pharmacology
- A09  Other \_\_\_\_\_

### B. Primary Activity (check all that apply)

- B01  Direct Patient Care
- B02  Medical Teaching
- B03  Medical Research
- B04  Administration
- B05  Other \_\_\_\_\_

### C. Clinical Focus (check one)

- C01  Imaging
- C02  Interventional
- C03  Electrophysiology
- C04  General
- C05  Pediatric
- C06  Surgery
- C07  Vascular Medicine
- C08  Heart Failure
- C09  Transplant
- C10  Preventive
- C11  Adult Congenital
- C12  Other \_\_\_\_\_

### D. Non Clinical (check all that apply)

- D01  Quality Improvement
- D02  Database Management
- D03  Other \_\_\_\_\_

### E. Special Interest Groups (optional)

- E01  Women Cardiologists
- E02  Early Career (1 – 5 years in practice)

### F. Non Medical Primary Focus

(check all that apply)

- F01  Sales/Marketing
- F02  Research
- F03  Education
- F04  Consulting
- F05  Product Training
- F06  Management/Administration
- F07  Other \_\_\_\_\_

# Registration Form

**Payment**

Check enclosed  
(payable to ACC.07/i2 Summit; U.S. funds drawn on a U.S. bank)

- American Express
- Visa
- Mastercard
- Discover
- Diner's Club

Card Number

Exp. Date

Print Name

Signature

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**RETURN TO ITS**

**By Internet—**  
[www.acc.org](http://www.acc.org)

**By Fax —**  
24 Hours — Credit Card Only  
(800) 521-6017  
(847) 940-2386 — Outside the United States and Canada

**By Telephone —**  
Credit Card Only  
Have This Form Handy!  
(800) 650-6870  
(8 a.m.–5 p.m. Central Time)  
(847) 940-2155 — Outside the United States and Canada

**By Mail—**  
ACC.07/i2 Summit  
108 Wilmot Rd  
Suite 400  
Deerfield, IL 60015-5124  
*Do Not Mail if Previously Faxed.*

**Reg Category**

**ACC Member:** RA00 RI00

- M.D.
- D.O.
- Ph.D.

**ACC International Associate** RA22 RI22

**ACC Cardiac Care Team Member:** RA23 RI23

- Nurse Practitioner
- Nurse
- Physician Assistant
- Clinical Nurse Specialist

**ACC Fellow in Training Member** RA01 RI01

**Abstract Presenter** RA02 RI02

**Nonmember:** RA03 RI03

- M.D.
- D.O.
- Ph.D.

**Nonmember Trainee/Resident \*** RA04 RI04

**Nonmember, Nonphysician\*:** RA06 RI06

- Nurse Practitioner
- Nurse
- Physician Assistant
- Clinical Nurse Specialist
- Nutritionist
- Pharmacist
- Exercise Physiologist
- Technologist
- Other

**Practice Administrator \*** RA07 RI07

**Nonmedical: (no CME credit)** RA08 RI08

- Hospital Administrator
- Health care Consultant
- Pharma Industry
- Medical Device Industry
- Other

**Exhibits-Only (no CME credit)** RA09

**i2 One-Day Saturday**  
(One-day ticket will admit holder to all Saturday sessions and the Grand Opening Event)  
(i2 One-Day Saturday is included in the i2 2007 rates)

**ACC.07 One-Day**

- Sunday RA11
- Monday RA12
- Tuesday RA13

**i2 One-Day**

- Sunday RI11
- Monday RI12

**Family Member — per person** RA97

ACC.07			i2 Summit 2007 (includes ACC.07)		
Early Bird Until Oct. 31	Advance Until Feb. 21	On-Site	Early Bird Until Oct. 31	Advance Until Feb. 21	On-Site
\$280	\$335	\$415	\$580	\$635	\$710
\$520	\$575	\$650	\$975	\$1,085	\$1,230
\$140	\$165	\$220	\$260	\$315	\$415
\$50	\$50	\$50	\$50	\$50	\$50
n/a	\$75	\$75	n/a	\$75	\$75
\$840	\$900	\$975	\$1,185	\$1,240	\$1,315
\$290	\$350	\$425	\$545	\$655	\$800
\$290	\$350	\$425	\$545	\$655	\$800
\$545	\$600	\$675	\$1,030	\$1,130	\$1,270
\$840	\$900	\$975	\$1,185	\$1,240	\$1,315
\$560	\$615	\$695	n/a	n/a	n/a
\$95	\$95	\$95	n/a	n/a	n/a
\$535	\$590	\$665	n/a	n/a	n/a
n/a	n/a	n/a	\$810	\$860	\$935
\$75	\$75	\$75	n/a	n/a	n/a

**Hotel Deposit**

\$250 per room required.  
\$500 per one-bedroom suite; \$750 per two-bedroom suite.  
To arrange suites, you must go to [www.acc.org](http://www.acc.org) or call ITS.

**REGISTRATION FEE**

(amount circled above) \$ \_\_\_\_\_

**HOTEL DEPOSIT**

\$ \_\_\_\_\_

**TOTAL REGISTRATION AND HOTEL**

\$ \_\_\_\_\_

\*Verification required.