



ANNUAL MEETING



REGISTRATION FORM

PERSONAL INFORMATION

Step 1: Complete your contact information.

Full Name :

AHRA Member #:

Job Title:

Email :

Phone:

Credentials:

Organization:

Address:

City:

State:

Zip:

Yes, I would like to receive information from AHRA sponsors and exhibitors. AHRA will not share my email or telephone number, only name and mailing address.

REGISTRATION FEES

Step 2: Select your registration track and type.

- Established Leaders Registration**
For **experienced leaders** interested in best practices, real-time intelligence, and trends on the current and future state of imaging.
- Aspiring Leaders Registration**
For **new leaders**, career changers, or those taking on new management responsibilities. The focus is on essential management skills in imaging services.

REG TYPE	
<input type="checkbox"/> AHRA Member	\$675
<input type="checkbox"/> Non-Member plus AHRA membership*	\$780
<input type="checkbox"/> Non-Member	\$825

*Join & Register! Includes full meeting registration and membership through 12/31/2023. For NEW members only. Membership begins at date of registration.

Single Day Registration

Includes all educational programs, exhibit hall, and social events for that day ONLY.

Select Registration Type and Day

- AHRA Member \$350
- Non-Member plus AHRA membership* \$455
- Non-Member \$550

Monday Tuesday Wednesday

Exhibit Hall Only Registration (Comp)

Access to AHRA Exhibit Hall; Lunch is NOT included. Lunch tickets may be purchased onsite.

Monday Tuesday Wednesday

ATTENDEE INFORMATION

Step 3: Complete your preferences for an optimal experience.

- New AHRA Member
Joined since Sept 2022
- AHRA Annual Meeting First-Time-Attendee

Pursuant to the ADA, do you have an accommodation that would require assistance during this conference?: (circle) Yes No
Mobile Vision Auditory Dietary (medically necessary) Other

Dietary Request: (circle)
Vegetarian Vegan Gluten-Free Dairy Free Pescatarian Kosher

Medically Diagnosed Dietary Allergy: (circle)
Gluten Dairy Soy Peanut Tree Nut Fish Shellfish
Other: _____



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WORKSHOPS

Step 4: Select your desired workshops.

CRA Exam Prep Workshop

Sunday, July 9 | 8:00am - 5:00pm

With purchase of Full Meeting Registration

AHRA Member \$150

Non-Member \$180

Workshop Only

AHRA Member \$300

Non-Member \$330

2023 Executive Leadership Program

Sunday, July 9 | 8:00am - 12:00pm

AHRA Member \$100

Non-Member \$130

How to Manage Negative/Disagreeable Employees

Sunday, July 9 | 8:00am - 12:00pm

AHRA Member \$100

Non-Member \$130

Road Map to Inclusive Excellence

Sunday, July 9 | 1:00pm - 5:00pm

AHRA Member \$100

Non-Member \$130

GUEST REGISTRATION

Step 6: Add your guests.

Adult Guest Package (13+) \$100 per guest
of guests: _____

Youth Guest Package (3-12) \$50 per guest
of guests: _____

Includes admittance for one guest into the following events:

Keynote Sessions: MON 7/10, TUES 7/11, WEDS 7/12

Exhibit Hall Lunches: MON 7/10, TUES 7/11, WEDS 7/12

AHRA Closing Event: WEDS 7/12

Guest badges are for family members accompanying you to the AHRA Annual Meeting. They are not intended for radiology or other healthcare professionals. AHRA reserves the right to deny guest badges to any individual for any reason at any time. Please provide the full names of the family members who will need badges:

MULTIPLE REGISTRANTS DISCOUNT

Step 7: Apply a discount for multiple registrants from the same facility/institution.

Take 20% off the registration fee for the third and additional registrants from the same facility/institution. This discount does not apply to multiple facilities within a health system.*

NOTE: This discount applies to the registration fee ONLY. It does not apply to workshops or guest fees.

Please list the names of other registrants from your facility:

*Each registrant MUST complete their own registration form.

REGISTRATION SUMMARY

Step 8: Total your registration selections.

Annual Meeting Registration Fee		_____
Multiple Registration Discount (20%)	-	_____
Additional Workshops	+	_____
	+	_____
Adult Guest Package	+	_____
Youth Guest Package	+	_____
TOTAL:		_____

REGISTRATION PAYMENT

Step 9: Complete payment information.

Registration payment MUST accompany this form.

Check/Money Order enclosed, payable to AHRA

Credit Card
Visa MasterCard Discover American Express

Name on Card

Card Number

Exp. Date

Postal Code

REGISTER ME NOW!

Step 10: Submit your registration form.

MAIL: AHRA 2023 Registration

2 Mount Royal Ave, Suite 201, Marlborough, MA 01752

FAX: AHRA 2023 Registration; (978) 443-8046

ONLINE: www.ahra.org/annualmeeting

EMAIL: payments@ahra.org