



Improving Lives Through the Prevention & Treatment  
of Anogenital & HPV-Related Diseases

## COMPREHENSIVE COLPOSCOPY ONLINE REGISTRATION FORM

**April 1 – June 30, 2021**  
**(Registration Deadline: March 31)**

Name: \_\_\_\_\_ Credentials: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone : \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

***If you are not an ASCCP Member and want to receive discounted registration rates, you may join by going to***  
***[www.asccp.org/member-benefits](http://www.asccp.org/member-benefits)***

### Registration Type

|  |             |
|--|-------------|
| <input type="checkbox"/> ASCCP Physician Member                        | \$ 895.00   |
| <input type="checkbox"/> Physician Non-Member                          | \$ 1,195.00 |
| <input type="checkbox"/> ASCCP Physician Assistant Member              | \$ 795.00   |
| <input type="checkbox"/> Physician Assistant Non-Member                | \$ 1,045.00 |
| <input type="checkbox"/> ASCCP Researcher Member                       | \$ 795.00   |
| <input type="checkbox"/> Researcher Non-Member                         | \$ 1,045.00 |
| <input type="checkbox"/> ASCCP Nurse/Nurse Practitioner/Midwife Member | \$ 795.00   |
| <input type="checkbox"/> Nurse/Nurse Practitioner/Midwife Non-Member   | \$ 1,045.00 |
| <input type="checkbox"/> ASCCP Trainee Student Member                  | \$ 395.00   |
| <input type="checkbox"/> Trainee Non-Member*                           | \$ 495.00   |

**Total Registration Fee** \$ \_\_\_\_\_

\*Trainee Non-Members must submit proof that they are currently enrolled in a training program. Acceptable documents are a letter from your Department Chair or a Student ID.

### Method of Payment

☐ Check ☐ Visa ☐ Mastercard ☐ AMEX

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Name (as it appears on the card): \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Signature: \_\_\_\_\_

### Cancellation Policy

Written cancellation must be received at least 30 days prior to the start of the course. Any notice received by this time will be refunded, less a \$100.00 administrative fee. No refunds will be made after that date.

### Send Completed Registration Form to:

ASCCP, c/o SHS Services, LLC, 131 Rollins Ave, Suite 2, Rockville, MD 20852 | F: 301-433-7971 | [info@asccp.org](mailto:info@asccp.org)