Prefix: \_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Credentials (required): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Country:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone (required): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Twitter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Pronouns:** If you would like to have your pronouns listed on your badge, please add them here: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FULL REGISTRATION**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Early (by 3/30)** | **Advance (3/31 – 5/04)** | **Onsite (after 5/04)** |
| Member | \_\_ $850 | \_\_ $965 | \_\_ $1070 |
| Non-Member | \_\_ $1310 | \_\_ $1310 | \_\_ $1410 |
| Student Member | \_\_ $460 | \_\_ $510 | \_\_ $560 |
| Student Non-Member | \_\_ $560 | \_\_ $560 | \_\_ $615 |
| Speaker Member | \_\_ $800 | \_\_ $915 | \_\_ $1020 |
| Speaker Non-member | \_\_ $1210 | \_\_ $1260 | \_\_ $1360 |

**DAILY REGISTRATION** (Rates are per day)

**Tue. 05/23 Wed. 05/24 Thurs. 05/25**

Member \_\_ $520 \_\_ $520 \_\_ $520

Non-member \_\_ $625 \_\_ $625 \_\_ $625

*Continued on next page*

**WORKSHOPS**

Workshops are included in the registration fee, but you still need to indicate which ones you are attending. Select only one workshop per timeslot, please.

**Tues. 5/23, 8:00 a.m. – 10:00 a.m.**

**Workshop Title Select One**

|  |  |
| --- | --- |
| W01: Azure Health Data Services for Synthetic Health Data Generation to Accelerate Patient-Centered Outcomes Research Workshop |  |
| W04:Touching the Heart of One May Influence the Minds of The World – How To Manage Successful Mentoring Partnerships |  |
| W06: Knowledge Management at Scale |  |

**Tues. 5/23, 8:00 a.m. – 12:30 p.m.**

**Workshop Title Select One**

|  |  |
| --- | --- |
| W02: CMIO Workshop |  |
| W03: Clinicians on FHIR: How FHIR Enables Interoperability |  |
| W05: How to Effectively Negotiate the Professional and personal Outcomes You Really Desire? |  |

**Tues. 5/23, 10:30 a.m. – 12:30 p.m.**

**Workshop Title Select One**

|  |  |
| --- | --- |
| W07: Clinical Informatics Consult 101: Requesting and Interpreting On-demand Real-world Data Analyses |  |
| W08: PINA Workshop: Pitching for Resources, Swinging for the Fences - A Workshop for Clinical Informatics Leaders on Making the Business Case for Organizational Resources |  |
| W09: Clinician Review of Discrete Clinical Element Models |  |

**Tues. 5/23, 2:00 p.m. – 4:00 p.m.**

**Workshop Title Select One**

|  |  |
| --- | --- |
| W10: Climate Health Informatics: Design Workshop to Accelerate Action |  |
| W11: Co-Creating Collective Impact in Clinical Informatics: A Workshop for C-Suite Informatics Leaders |  |
| W12: CardinalKit: FHIR-Native Open-Source Mobile Application Development Framework for Digital Health Innovations |  |
| W13: Organizational Issues and Informatics: Translating Theory into Practice |  |
| W14: Moving from Planning to Publication: Successfully Writing a Clinical Informatics Case Report |  |
| W15: Bringing the Work of 25x5 Home: Ideating to Address Documentation Burden |  |

**AMIA MEMBERSHIP**

**Complete information about AMIA membership is available on the AMIA Web site at** [**www.amia.org**](http://www.amia.org)

Regular membership affords registrants the opportunity to receive full member benefits of AMIA including member rates for the AMIA 2022 Clinical Informatics Conference.

**Regular Student YIP\*\* Retired**

Join or Renew your membership for 2022 \_\_ $400 \_\_ $50 \_\_ $220 \_\_ $185

\*\* Young Informatics Professional

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**PUBLIC HEALTH ATTESTATION** *(Required Field)*

* AMIA requires all attendees and staff will comply with all appliable health and safety laws and directives, as well as any guidelines of AMIA and the hotel, including with respect to face coverings and physical distancing. AMIA’s international guests must follow applicable laws when traveling to and entering the United States. All attendees must comply with Current AMIA Conference Policies for Public Health and Safety listed [here](https://amia.org/about-amia/leadership-and-governance/bylaws-and-policies/current-amia-conferencing-policies-public).

\_\_\_ I agree

**ASSUMPTION OF RISK and LIABILITY WAIVER and RELEASE** *(Required Field)*

* By registering for this American Medical Informatics Association (“AMIA”) event, and in consideration of being permitted to attend and participate, on behalf of myself as well as my family, personal representatives, successors and assigns, I hereby knowingly and voluntarily assume all risk of injury, harm, and loss, and even death, that may result in connection with the event, including but not limited to exposure to disease or virus. I also release, waive, and forever discharge any and all liability, claims, and demands of whatever kind or nature related to the event and arising from my death, bodily injury, illness, economic loss or out of pocket expenses, or loss or damage to property, against AMIA and its directors, officers, employees, volunteers, and agents (the “released parties”), in law and in equity, to the fullest extent permissible by law, including but not limited to damages or losses caused by the negligence or other fault (excluding intentional misconduct) on the part of the released parties. The foregoing waiver and release does not apply to the extent prohibited by law.  
    
  \_\_\_ I agree

**AMIA’S MEETING ANTI-HARASSMENT POLICY** *(Required Field)*

* By registering for the AMIA 2023 Clinical Informatics Conference I agree to abide by [AMIA’s Meeting Anti-Harassment Policy](https://amia.org/about-amia/leadership-and-governance/bylaws-and-policies/amia-meeting-anti-harassment-policy)

\_\_ I agree

**CONTINUING EDUCATION CREDIT** *(Required Field)*

Please select the continuing education credit you will earn for this live activity.

\_\_ CME

\_\_ CNE

\_\_ No Credit – Certificate of Participation

**CELL PHONE CONTACT (Required field)**

By registering for the AMIA 2023 Clinical Informatics Conference, I authorize AMIA to contact me via text message/SMS for major meeting updates or in case of emergency. I may opt-out below:

\_\_ I do not want AMIA to contact me via text message/SMS

*Continued on next page*

**CONTACT FROM SPONSORS/EXHIBITORS** *(Required Field)*

For this event, how would you like to hear from our sponsors and/or exhibitors?

\_\_ Email

\_\_ Please remove me from sponsor and/or exhibitor contact lists for this event.

**EMERGENCY CONTACT INFORMATION** *(Required Field)*

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

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PAYMENT INFORMATION**

Total Registration Fees: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total Membership Fees: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Total to be Charged** $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**To Pay by Credit Card:**

To keep your credit card payment secure, we do not accept credit card payments via email or mail. Please register at <https://amia.org/education-events/amia-2023-clinical-informatics-conference/registration> or call us, 301.657.1291.

**To Pay by Check:**

Make check payable to American Medical Informatics Association.

Mail this form & check to:

American Medical Informatics Association Inc.

P. O. Box 412989

Boston, MA 02241-2989