MEETING REGISTRATION FORM

Name____________________________________Degree_____________________
Institution_____________________________________________________________
Address________________________________________________________________

City________________________________________Proc/State________Country______PC/Zip_____
Phone______________________________E-mail _____________________________

TELL US ABOUT YOURSELF

Professional Role:  o Faculty       o Practicing Physician (direct patient care, non-teaching setting, min. 50% of time)
o Administrator  o Student       o Resident       o Graduate Student  o Fellow
o Researcher      o Other (please specify)__________________________

Specialty: o Family Medicine  o Internal Medicine  o Pediatrics  o Public Health
  o Nursing   o Other ______________

Are you a first-time attendee?  o Yes  o No

Do you need a special accommodation to fully participate?  o Yes  o No
Please describe:  ____________________________________________________________

Attendee name and contact information will be shared with other NAPCRG attendees at this event. Please check the box below if you'd like to opt out of having your information shared.
o Opt Out of Sharing

2021 REGISTRATION RATES
The following rates apply to the meeting. Visit www.napcrg.org/member-center/joinrenew for more information on NAPCRG membership levels and fees.

<table>
<thead>
<tr>
<th></th>
<th>Early Bird Rate</th>
<th>Regular Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(August 16 - October 18)</td>
<td>(October 19 and after)</td>
</tr>
<tr>
<td></td>
<td>Member</td>
<td>Non-Member</td>
</tr>
<tr>
<td>Physician</td>
<td>$375</td>
<td>$675</td>
</tr>
<tr>
<td>Other Primary Care Researcher</td>
<td>$345</td>
<td>$645</td>
</tr>
<tr>
<td>Fellow</td>
<td>$175</td>
<td>$275</td>
</tr>
<tr>
<td>Resident</td>
<td>$150</td>
<td>$210</td>
</tr>
<tr>
<td>Graduate Student w/Terminal Degree</td>
<td>$150</td>
<td>$190</td>
</tr>
<tr>
<td>Student</td>
<td>$150</td>
<td>$170</td>
</tr>
<tr>
<td>Patient/Community</td>
<td>$150</td>
<td>$170</td>
</tr>
</tbody>
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REGISTRATION POLICIES

Early Bird Discount
Don’t delay your registration and you can be eligible for the Annual Meeting early-bird discount of $100 off. Register for the meeting by October 18, 2021 in order to receive the discounted rate.

Pricing for Developing Countries
Creating global connections is an important priority for NAPCRG. With our virtual format, there is no better time for us to break new ground sharing, inspiring, and connecting. For this year’s Annual Meeting, we are offering attendees from developing countries a discount of at least 50% off 2021 registration fees. This concession, along with freedom from travel expenses, allows us to welcome more new and long-term primary care researchers from different areas of the world, including many we have not had the privilege of hosting at previous NAPCRG gatherings. Eligible countries are those that are defined by the World Organization of Family Doctors as developing countries. Potential attendees from these areas should contact Jazzmin Jones at napcrgoffice@napcrg.org to register at this special price. Our team is happy to discuss further assistance to those who have hardship with NAPCRG membership fees (also required as part of registration) or are not located in one of the defined developing countries.

Cancellation Policy
Since many of the 2021 Annual Meeting presentations will be available on-demand after the conclusion of the Annual Meeting through the end of the year (Dec. 31, 2021), NAPCRG will not be issuing registration refunds. Once registered, attendees will have at least 30 days to participate and/or view on-demand presentations based on their personal schedules.

Guaranteed access
The completed registration form and payment must be received by NAPCRG by November 10, 2021 to guarantee access to the meeting on November 19, 2021. Any registration forms and payment received after this date may have delayed access.

PAYMENT INFORMATION

- MasterCard
- Visa
- American Express
- Check (Make check or money order payable to NAPCRG)

Card Number: Exp Date: CCV: Total Fees: $

Cardholder: Signature: 

(Tax ID #51-0239450)

HOW TO REGISTER...
Online: www.napcrg.org
By Mail: 11400 Tomahawk Creek Pkwy, Suite 240, Leawood, KS 66211
Questions? napcrgoffice@napcrg.org