

## MEETING REGISTRATION FORM

(\*Fields with asterisk are required)

\*Name \_\_\_\_\_ Credentials \_\_\_\_\_

\*Name to appear on badge \_\_\_\_\_

Organization \_\_\_\_\_

\*Address \_\_\_\_\_

\*City \_\_\_\_\_ Prov/State \_\_\_\_\_ \*Country \_\_\_\_\_ PC/Zip \_\_\_\_\_

Phone \_\_\_\_\_ \*E-mail \_\_\_\_\_

### TELL US ABOUT YOURSELF

\*Date of Birth: \_\_\_/\_\_\_/\_\_\_

**\*Gender Identity (Select all that apply):**

- |   |  |
|---|--|
| <input type="radio"/> Female/Woman                      | <input type="radio"/> Male/Man               |
| <input type="radio"/> Genderqueer/Gender non-conforming | <input type="radio"/> Non-binary             |
| <input type="radio"/> Prefer to self-describe           | <input type="radio"/> Choose to Not Describe |

**\*Race or Ethnicity (Which of the following best defines your race or ethnicity? Select all that apply):**

- |   |  |
|---|--|
| <input type="radio"/> American Indian/Alaskan Native/Indigenous | <input type="radio"/> Asian                                  |
| <input type="radio"/> Black/African American                    | <input type="radio"/> Hispanic/Latino/Of Spanish Origin      |
| <input type="radio"/> Middle Eastern/North African              | <input type="radio"/> Native Hawaiian/Other Pacific Islander |
| <input type="radio"/> Choose to Not Describe                    | <input type="radio"/> White                                  |

**\*There is also a definition of underrepresented in medicine:**

Underrepresented in medicine (URM) means those racial and ethnic populations that are underrepresented in the medical professional relative to their numbers in the general population (Black/African American, Hispanic/Latino/of Spanish Origin, American Indian/Alaska Native/Indigenous, Native Hawaiian/other Pacific Islander, and certain Asian ethnicities\*)

\*Vietnam, Cambodia, Indonesia, and Laos

**I self-identify as URM:**      Yes    No

**\*Professional Role:**

- |  |  |
|--|--|
| <input type="radio"/> Administrator  | <input type="radio"/> Faculty          |
| <input type="radio"/> Fellow   | <input type="radio"/> Graduate Student |
| <input type="radio"/> Practicing Physician (direct patient care, non-teaching setting, min. 50% of time) |  |
| <input type="radio"/> Researcher   | <input type="radio"/> Resident         |
| <input type="radio"/> Other (please specify) _____   |  |

**\*Specialty:**

- |                                       |   |
|---------------------------------------|---|
| <input type="radio"/> Family Medicine | <input type="radio"/> Internal Medicine |
| <input type="radio"/> Nursing         | <input type="radio"/> Pediatrics        |
| <input type="radio"/> Public Health   | <input type="radio"/> Other _____       |

\*Are you a research director?  Yes      No

\*Are you a first-time attendee?  Yes  No

I am requesting special ADA Accommodations to full participate in the conference.  Yes  No  
Special Accommodations:

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Do you have any special dietary needs?

- None
- Gluten free
- Vegan
- Vegetarian
- Other \_\_\_\_\_

\*I acknowledge that by attending the Annual Meeting I may be photographed or recorded during conference proceedings and these media may be used for future NAPCRG promotional purposes.  
 Yes

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.

- Opt Out of Sharing

## VOLUNTEER OPPORTUNITIES

\*Would you like to moderate a session during the meeting?  Yes  No

## 2023 REGISTRATION RATES

	Early Bird Rate		Regular Rate	
	(July 1 - October 2)		(October 3 and after)	
	Member	Non-Member	Member	Non-Member
Physician	\$790	\$1,120	\$910	\$1,240
Other Primary Care Researcher	\$765	\$1,095	\$885	\$1,215
Fellow	\$479	\$589	\$579	\$689
Resident	\$375	\$440	\$475	\$540
Graduate Student w/Terminal Degree	\$375	\$415	\$475	\$515
Student	\$375	\$395	\$475	\$495
Patient/Community	\$375	\$400	\$475	\$500

*\*2023-2024 NAPCRG membership is required to register for the Annual Meeting. A membership fee will be added to your registration fee, if needed. Visit [www.napcr.org/member-center/joinrenew](http://www.napcr.org/member-center/joinrenew) for more information on NAPCRG membership levels and fees.*

\*Please indicate your registration category:

- Physician
- Fellow
- Graduate Student w/Terminal Degree
- Patient/Community
- Other Primary Care Researcher
- Resident
- Student

## PRECONFERENCE PROGRAMMING

### ○ PR1: Patient and Clinician Engagement Program: Characteristics of the “just right” investigator for patient engaged research

Monday, October 30; 1:00 – 5:00pm

Fee: \$0 (This preconference is open to all. Registration is required.)

Description:

*The preconference workshop will feature guest speakers followed by break-out groups to discuss what makes the “just right” Principal Investigator (PI) What are the necessary characteristics, attitudes, and actions a PI requires to form a strongly engaged research team? That is, a research team that fully engages patient or community member partners to achieve meaningful and implementable results.*

### ○ PR2: Rising Stars in Research

Monday, October 30; 10:00am – 2:00pm

Fee: \$0 (This preconference is open to trainees and mentors. Registration is required.)

Description:

*The trainee preconference workshop will consist of skill building and career development sessions, as well as relevant topical sessions on artificial intelligence use in primary care. This workshop will consist of didactic sessions (e.g., presentations), as well as group discussion and activities, allowing ample opportunity for both formal and informal discussion with peers.*

### ○ PR3: Artificial Intelligence and Machine Learning (AI/ML) Bootcamp

Monday, October 30; 8:30am – 4:30pm

Fee: \$0 (This preconference is open to all. Registration is not required.)

Description:

*Join us for our Preconference Workshop on Artificial Intelligence and Machine Learning (AI/ML) in Primary Care! Immerse yourself in a day of knowledge sharing, engaging discussions, and exciting presentations as we delve into the world of AI/ML applications in primary care. This workshop is designed to educate participants on the latest concepts, advancements, and challenges in AI/ML, with a specific focus on primary care settings.*

*During a morning lecture series, experts will guide you through the fundamental concepts and foundations of AI/ML, the current state of AI/ML in primary care through real-world case studies and success stories, and the potential benefits and challenges associated with its adoption. In the afternoon, you will witness a “Mock Shark Tank” session wherein Grant Generating Project (GGP) Fellows will present AI/ML use cases, seeking valuable feedback and insights from our distinguished panelists and attendees.*

## NAPCRG Health and Safety Policy for Conferences, Events, and Meetings

To attend the NAPCRG Annual Meeting and/or any related meetings or events you acknowledge that an inherent risk of exposure to CoVID-19 exists in any public place where people are present.

By participating you voluntarily assume all risks related to exposure to CoVID-19 and agree not to hold NAPCRG or any of their affiliates, directors, officers, employees, agents, contractors, exhibitors, sponsors or volunteers liable for any illness, injury, disability or Public Health restrictions including, but not limited to mandatory quarantine requirements. Moreover, you also agree to follow all local and property specific protocols such as, but not limited to, capacity limits, screening, masking, physical distancing and collection of contact information where required.

[Click here to view the full policy.](#)

○ \*I have read to the North American Primary Care Research Group’s COVID-19 acknowledgement and agree to above statement.

## PAYMENT INFORMATION

American Express    Discover Card    MasterCard    Visa    Check *(Make check or money order payable to NAPCRG)*

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

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

(Tax ID #51-0239450)

**Cancellation/Refund Policy:** All Requests for refunds must be received in writing. Written requests received by NAPCRG before October 2, 2023, will received a 50% refund. No refunds will be issued after October 2, 2023.

### **HOW TO REGISTER...**

Online: [www.napcrg.org](http://www.napcrg.org)

By Mail: 11400 Tomahawk Creek Pkwy, Suite 240, Leawood, KS 66211

Questions? Contact [napcrgoffice@napcrg.org](mailto:napcrgoffice@napcrg.org)