

# CIS 2024 ANNUAL MEETING: Immune Deficiency and Dysregulation North American Conference



MAY 1–4, 2024 · RENAISSANCE MINNEAPOLIS HOTEL, THE DEPOT

### **REGISTRATION FORM**

### STEP 1: CONTACT INFORMATION

Name:	IORMATION		Desig	nation (MD, PhD, DO, RN, etc): .		
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			Zip Code:	Country:		
•	E-mail:		•	•		
Is this your first time attending the CIS An						
STEP 2: SPECIALTY	STEP 3: REGISTRATION FEES					
(check primary specialty only)	ANNUAL MEETING AND PRE-CONFEREN	CE EDUCATION D	ΔY	Through February 10	February 10 - April 5	
Allergy/Asthma/Pulmonary	Regular Member			\$550	\$650	
Autoimmunity	Trainee Member			\$100	\$100	
Cardiovascular	Associate/Allied Health Member			\$300	\$350	
Cytokines	Non-Member			\$900	\$1,000	
Dermatology	Non-Member: Trainee			\$150	\$150	
Diagnostic/Laboratory Immunology	Non-Member: Allied Health			\$600	\$650	
Endocrinology	Developing Country (Member or Non-Me	ember)		\$300	\$350	
Gastroenterology	One Day Registration	·		\$350	\$400	
Hematology	Industry/Exhibitor-Delegate			\$900	\$1,000	
HIV/Infectious Diseases	COMPLIMENTARY SESSIONS					
Histocompatibility	I plan to attend the complimentary Closin	g Reception on Frid	ay, May 3 (OPEN TO AL	L)		
Immunodeficiency						
Immunogenetics	STEP 4: CIS FOUNDATION SUP	PORT (OPTIO	ONAL)			
Immunotherapy	FOUNDATION HAPPY HOUR FUNI	DRAISER				
MS/Neuroimmunology	NEW for 2024: CIS will be hosting our Annual					
Mucosal Immunology Pathology	connect with your colleagues after the first day	of the Annual Mee	eting over hors d'oeuvres	and drinks. And of course, the CIS	S band, The Immunogoblins,	
Ophthalmology	will be performing!					
Reproductive Immunology	Buy your ticket today! All proceeds go to the C	IS Foundation!				
Rheumatology	FOUNDATION RIBBON					
Transplantation	Show your support at the Annual Meeting with			ie Booster" Ribbon to wear on you	ır badge! Each ribbon is \$25	
Tumor Immunology	and will help the Foundation's mission to deve	lop the immunologi	sts of tomorrow.			
Other:	FOUNDATION DONATION					
	Want to provide general support to the CIS Foundation? Consider donating directly to the CIS Foundation to help fund our ongoing mission! If you would					
	like to make a donation on a separate credit c	ard, please contact	the CIS office at info@c	linimmsoc.org.		
	FOUNDATION PURCHASES					
	Happy Hour: Ticket(s) x \$75 =					
	Trainee Ticket(s)					
	Developing Counti					
	Foundation Ribbon: \$25	•				
	Foundation Donation: \$					
	Total Due: \$					



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### **REGISTRATION FORM**

### **STEP 5: PAYMENT INFORMATION**

Registration Total: \$	
Foundation Total: \$	
Total Amount Enclosed/Authorized to Charge: \$	
$\label{eq:make_payable} Make check payable to CIS (US funds drawn on a US bank only) or provide credit card information (a) and (b) are considered as a constant of the constant of th$	n. Please do not send cash.
Check Enclosed VISA MASTERCARD DISCOVER AMERICAN EXPRE	SS
Credit Card Number:	Expiration Date:
Name of Card Holder (please print):	
STEP 6: PRIVACY POLICY  CIS takes your privacy seriously and will only use your personal information to administer your req from CIS and otherwise as you may expressly consent. A complete copy of CIS' Privacy and Data I https://clinimmsoc.org/CIS/Legal_Notices.htm	gistration and attendance at the above-referenced meeting, to provide services that you have requested Protection Policy, the terms of which are incorporated herein, can be found at
CIS will only use the information collected during the registration to administer and facilitate your email addresses are provided) and with others providing goods and services for the meeting, inclu	attendance at the meeting. This includes sharing your Information with exhibitors at the meeting (no ding personnel at the hotel in which the meeting will be held.
CIS will be utilizing a photographer to take photographs during the Annual Meeting. These images media, including CIS and/or the meeting website. If you wish to not have your photograph taken	
If you agree to have your information used in the manner described above please select "I Agree' select "I Disagree" below.  I Agree I Disagree	below. If you would not like to have your information shared in the manner described above please
You can revoke your consent above by contacting CIS anytime at info@clinimmsoc.org.	

#### CANCELLATION POLICY

Refunds or registration cancellation requests must be made in writing to CIS by April 5, 2024. A \$25.00 processing fee will be charged for all refunds. No refunds will be granted after the April 5, 2024 deadline. Request for cancellation should be sent to info@clinimmsoc.org.

Send completed form to: Clinical Immunology Society • Attn: Meeting Registration • 555 E. Wells Street, Suite 1100 • Milwaukee, WI 53202

Phone: +1.414.224.8095 • Fax: +1.414.272.6070 • Email: info@clinimmsoc.org