To nominate an individual to attend the ADFM conference as a Senior Leader, please complete this registration form and send it to Kim Sevedge at adfm@adfm.org with a note of approval from the member chair or administrator for the individual to attend (formal letter not required; an email indicating support is fine!).

Name: ____________________________________________________________________________

Institution: _______________________________________________________________________

Mailing Address: ___________________________________________________________________

City: ___________________________ State: _______ Zip: ________________

Telephone (daytime): ______________ Fax: ____________________________

Email: ___________________________________________________________________________

Role in Your Department: ______________________________

Is this your first ADFM meeting? (check) YES ____ NO ____

Do you need any special accommodations to participate in the meeting? YES ____ NO ____
*if yes, a staff member will reach out to you

Any dietary restrictions?

- Vegetarian
- Vegan
- Gluten Free
- Other

REGISTRATION FEE*:

<table>
<thead>
<tr>
<th>Role</th>
<th>If Member Dues are Already Paid</th>
<th>If Renewing Dues with Registration</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHAIR</td>
<td>$650</td>
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<tr>
<td>SENIOR LEADER</td>
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<td>ASSOCIATE</td>
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<tr>
<td>ASSOCIATE (RETIRED/NOT EMPLOYED)</td>
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PRECONFERENCES AND OPTIONAL SESSIONS: (Additional fees apply)

- 2/21; 8:00 am-5:00 pm Administrators’ Preconference ($165)
  *Administrators only*

- 2/21; 1:00-5:00 pm Leadership Development: Tools for Enhancing Your Leadership Skills ($75)
  *Open to all attendees; ADFM LEADS Fellows, Senior Leaders, and New Chairs encouraged to attend*

- 2/21; 1:00-5:00 pm BRC Precon The Art of Negotiation - Leveraging It to Increase Your Department’s Research Capacity ($75)
  *Open to all attendees; BRC Fellows and those interested in growing their research capacity are encouraged to attend.*

- 2/23; 12:45 - 2:45 pm New Chairs 101 Lunch & Workshop ($85)
  *Suggested for new chairs (open to all attendees)*

- 2/23 5:30 - 6:00 pm Celebrating the LEADS Fellowship: Fellows, Alumni, Mentors, & Supporters (Free)
  *Open to all attendees, suggested to those who have participated in the LEADS Fellowship or are interested in participating in future years.*

- 2/23; 6:00-8:00 pm Leadership and Management Dilemmas Workshop [Dinner Included] ($150)
  *Open to all attendees*

Conference Registration Fee: $_______________________________
Precons/Optional Events: $_______________________________
TOTAL: $________________________

Method of Payment:

☐ Check enclosed, payable to ADFM

☐ Mastercard    ☐ Visa    ☐ American Express

Card number: _____________________________   CVV: _______ Expiration: _________

Name on Card: ___________________________________________________________________
Billing Address: __________________________________________

Mail, fax or email this form with payment to:

ADFM, 11400 Tomahawk Creek Parkway, Suite 240, Leawood, KS 66211-2672

Fax with credit card information to 913-906-6096 or email to adfm@adfm.org

Refunds: Requests for refunds must be received in writing by ADFM. 50% of the total meeting registration fee will be refunded if written notification is received in the ADFM office 30 days in advance of the meeting. No refunds will be issued thereafter.

As a condition of your attendance at this event, please click the box below to indicate your acknowledgment of, and agreement to the following:

● If I have symptoms of COVID-19 or other contagious illnesses, I will recuse myself from participating in the ADFM conference.

● I agree to follow all instructions and safety precautions posted or provided by ADFM, the conference and/or event venue, and/or any governing authority during the conference and/or event attendance (which may include wearing masks in all meeting areas). It is understood and agreed that my failure to do so may result in being excluded from the event without refund, reimbursement, or other remuneration.

I understand that COVID-19 is an extremely contagious disease that can lead to severe illness and death, especially among the unvaccinated. I acknowledge my own desire and voluntary choice to travel to and participate in the 2024 Annual Conference. I assume all risks and accept sole responsibility for any injury (including, but not limited to, personal injury, illness, disability, and death) that I may experience in connection with attending. I hereby waive, release, and hold harmless the ADFM, their employees, agents, contractors, and representatives from any claims, liabilities, actions, damages, losses, costs, or expenses of any kind arising out of or relating to my attendance.

Please sign below to indicate that you have read and understand the statements above and that your statements are true and correct.

____________________________________________________________________________

First Name & Last Name