

REGISTRATION FORM

Annual Chapter Leader Forum

April 27-29, 2017 (Preconference April 26)

Sheraton Kansas City Hotel at Crown Center • Kansas City, MO

Register online at
www.aafp.org/aclf

AAFP Member ID #: _____

Name: _____

Nick Name (Badge Purposes): _____

Degree: _____

Address: _____

City, State, Zip: _____

Phone: _____

Fax: _____

Email (REQUIRED): _____

Emergency Contact Name: _____

Emergency Contact Phone #: _____

Registration Fees

	On or before 3/30/17	After 3/30/17
<input type="checkbox"/> AAFP Member <i>(Active, New Physician, International, Life, Supporting)</i>	\$230	\$280
<input type="checkbox"/> Chapter Staff	\$230	\$280
<input type="checkbox"/> Student/Resident	\$150	\$150

First-time Attendee

(963) I am a first-time attendee.

Please select one of the following.

- | | |
|--|---|
| <input type="checkbox"/> (200) AAFP Member | <input type="checkbox"/> (204) Chapter Executive |
| <input type="checkbox"/> (201) Chapter President | <input type="checkbox"/> (205) Deputy Chapter Executive |
| <input type="checkbox"/> (202) Chapter President-Elect | <input type="checkbox"/> (206) Chapter Staff |
| <input type="checkbox"/> (203) Chapter Board Member | |

Preconference Wednesday, April 26

Your registration includes preconference leadership training workshops on Wednesday, April 26. Additional details are available online at www.aafp.org/aclf. Please indicate if you will attend the sessions by checking the boxes below.

(102) Leadership Development Sessions

Optional Sessions Thursday, April 27

- (301) 9 - 10 am – Board Governance - Basic
- (302) 9 - 10 am – Board Governance - Advanced
- (303) 10:15 - 11:15 am – Board Governance - Basic
- (304) 10:15 - 11:15 am – Board Governance - Advanced
- (305) 1:15 - 2:15 pm – Effective Resolution Writing
- (306) 2:30 - 3:45 pm – Board Governance - General

Conference materials will be available on the ACLF website and in the event app in April. Limited printing stations will be available onsite.

Lapel Pin

Get your 2017 AAFP Family Medicine Experience (FMX) Commemorative Lapel Pin and support your AAFP Foundation. For a minimum donation, you can support AAFP Foundation programs, such as *Family Medicine Cares*.

(400) 2017 Foundation Lapel Pin – \$15

Opt In

- (998) I want to have my name, city, and state included in attendee lists.
- (999) I want to be included on the list provided to exhibitors, supporters, and in-kind supporters who may provide follow-up communications following the course.

Special needs

If you have physical or dietary restrictions, please mark the appropriate boxes below.

- (950) Vegetarian
- (951) Gluten Free
- (952) Wheelchair Accessibility
- (953) Hearing Impaired
- (954) Lactation Room

Method of Payment

Enclose check or indicate credit card information for the registration fee. **(Payment is expected to accompany this form to ensure participation.)**

- Visa Mastercard Discover American Express
- Check enclosed (payable to AAFP)

Total Due: \$ _____

Name on Card: _____

Card Number: _____

Exp Date: _____ CW: _____

Signature: _____

Photography and recording – The AAFP may take photographs and/or record audio and video at this event. By attending, you consent to the use of any photographs, audio, and video recordings of you by the AAFP and its designees in AAFP communications and promotions, or for any other lawful purpose.

Cancellation policy: The AAFP must receive notice of cancellation no later than April 5, 2017. Requests for full cancellations will be refunded, less a \$50 administrative fee. See the entire policy at www.aafp.org/cancellations.

Have you made your hotel reservation? For hotel information, visit www.aafp.org/aclf or call the hotel at (800) 325-3535. Make your reservation by March 30, 2017.



AMERICAN ACADEMY OF
FAMILY PHYSICIANS
STRONG MEDICINE FOR AMERICA

Return with payment or call:
American Academy of Family Physicians
Attn: Member Resource Center
11400 Tomahawk Creek Parkway, Leawood, KS 66211
Phone: (800) 274-2237 • Fax: (913) 906-6075
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