



## 2021 Annual Conference and Medical Symposium Registration

*If registering multiple people, please complete a separate form for each person.  
Please complete credit card transactions through online registration.*

**Bundled options:**

- |  |                          |       |
|--|--------------------------|-------|
| Annual Conference and Medical Symposium: |                          |       |
| <b>Member</b>                            | <input type="checkbox"/> | \$290 |
| Annual Conference and Medical Symposium: |                          |       |
| <b>Non-member</b>                        | <input type="checkbox"/> | \$350 |

**Ala carte options:**

- |                    |                          |       |
|--------------------|--------------------------|-------|
| Annual Conference: |                          |       |
| <b>Member</b>      | <input type="checkbox"/> | \$200 |
| Annual Conference: |                          |       |
| <b>Non-member</b>  | <input type="checkbox"/> | \$225 |
| Medical Symposium: |                          |       |
| <b>Member</b>      | <input type="checkbox"/> | \$120 |
| Medical Symposium: |                          |       |
| <b>Non-member</b>  | <input type="checkbox"/> | \$150 |

**Total:** \_\_\_\_\_

### Registrant Information

Full Name: \_\_\_\_\_  
Last
First
M.I.

Business: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address
Apartment/Unit #

\_\_\_\_\_  
City
State
ZIP Code

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

*Please return the completed document and payment to:*  
 BIANYS – AC/MS Registration  
 4 Pine West Plaza, Suite 402  
 Albany, NY 12205