



27th Annual National Education Conference
On Track for a Cure: Connecting the Community
 San Francisco, CA • June 29 - July 1, 2018
Registration Deadline: Monday, May 15, 2018

Attendee Information

First Name _____ Middle Name _____ Last Name _____

Title _____ Organization, if applicable _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____

E-mail _____ Phone number _____

Check all that apply: First-time Attendee Support Group Member - SG Name: _____
 Caregiver Medical Professional - Type: _____
 Other: _____

Spouse & Guest Information

Guest 1:

First Name _____ Last Name _____ E-mail _____

Check all that apply: First-time Attendee Spouse Caregiver Relationship: _____ Child Teen Child/Teen Age: ____ Sex: F M

Guest 2:

First Name _____ Last Name _____ E-mail _____

Check all that apply: First-time Attendee Spouse Caregiver Relationship: _____ Child Teen Child/Teen Age: ____ Sex: F M

Guest 3:

First Name _____ Last Name _____ E-mail _____

Check all that apply: First-time Attendee Spouse Caregiver Relationship: _____ Child Teen Child/Teen Age: ____ Sex: F M

Meal Information

Please check the sessions & meals you and/or your guests will be attending:

	You	Total # of Spouse/ Guests/Children
CSL Behring Walk for Breath	<input type="checkbox"/>	<input type="checkbox"/> _____
Friday Shire Breakfast	<input type="checkbox"/>	<input type="checkbox"/> _____
Friday Grifols Luncheon	<input type="checkbox"/>	<input type="checkbox"/> _____
Friday Dinner Reception	<input type="checkbox"/>	<input type="checkbox"/> _____
Saturday Breakfast	<input type="checkbox"/>	<input type="checkbox"/> _____
Saturday Lunch	<input type="checkbox"/>	<input type="checkbox"/> _____
Saturday Dinner	<input type="checkbox"/>	<input type="checkbox"/> _____
Sunday Breakfast	<input type="checkbox"/>	<input type="checkbox"/> _____

Dietary Requests

We can only accommodate vegan or gluten-free dietary requests.

I need: Vegan meals Gluten-free meals
 For: Attendee Guest 1 Guest 2 Guest 3

Kids and Teens Room

If you have children and/or teens attending, will they be using the Kids/Teen Room on Saturday, June 30th?

Yes No

Registration Fees

	#	Total
Attendee	\$ 150 x _____	= \$ _____
Each Spouse/Guest	\$ 135 x _____	= \$ _____
Children 12 & under	\$ 110 x _____	= \$ _____
One-day Registration	\$ 135 x _____	= \$ _____
Total to be charged		\$ _____

Payment Information

Type: Visa MasterCard AMEX Discover Check

Name as it appears on card _____

Card Number _____ CVV # _____

Authorized Amount \$ _____ Expiration Date _____

Signature _____



27th Annual National Education Conference

CHECKLIST



1. Register to attend the conference

1. Register Online:

a1f.org/alpha1conference

2. Fax completed form to:

ATTN: Kim Caraballo at
(305) 503-4629

3. Mail completed form with payment to:

Alpha-1 Foundation
ATTN: Kim Caraballo
3300 Ponce de Leon Blvd
Coral Gables, FL 33134



Book travel arrangements

Airport: San Francisco Airport (SFO)

Complimentary Hotel Shuttle: The hotel's complimentary shuttle runs every 10-15 minutes. From SFO, take your luggage to the Departures Level center island and look for the area marked "Hotel Shuttle." The shuttle bus is marked "Hyatt Regency and Marriott." For arrivals and departures between 12:00 a.m. and 4:46 a.m., free shuttles pick up guests every 30 minutes.

Parking: Self-parking at the hotel will be available for a discounted rate of \$12.50 per day.



Book hotel reservations

Reserve your hotel room online at a1f.org/sanfrancisco18 or over the phone by calling (650) 347-1234.

Room Rate: \$149 per night plus tax. This group rate will be honored up to three (3) days before and three (3) days after the official meeting dates based on availability at the hotel when the reservation is made.

Discounted Rate Deadline: Reservations must be made on or before Friday, June 1, 2018 in order to be eligible for the group rate.

Group Code: If you plan to make your hotel reservations by phone, be sure to mention the group code "Alpha-1 Foundation."

Be advised that in accordance with the provisions of the Physician Payments Sunshine Act, 42 U.S.C. 1320a-h and its implementing regulations ("PPSA") and Alpha-1 Foundation's contractual obligations related thereto, Alpha-1 Foundation may disclose to third parties, or otherwise make public, any payment or other transfer of value (as such term is defined in the PPSA) it makes to any physician or teaching hospital.