AANN Neuroscience Nursing Annual Conference

Saturday, March 21, to Tuesday, March 24, 2026 • Dallas, TX					1
Please print. Use a separa	ate form for each registrant. Duplica	ite as necessary.			
Complete name			First ı	name for badge	
Title				Credentials	
Facility			Facility city/state		
City/State/ZIP	,			(FTA) Check here if this will be	our first AANN conference.
Davtime phone (home	work) (Fax ()	E-mail (Required*)*%	_ , ,	
In case of emergency dur	ring the conference, please contact:		*//	ou will receive an e-mail confirmation of yo	ur registration when it has been processe
0 ,	5) Evening p	phone ()	
I have read and ag	ree to AANN's Liability Disclosure	e, Code of Conduct,	and <u>Media Disclosure,</u> which are avail	able on the AANN website.	
	All session times	listed below ar	e in Central Daylight Time (CD	T) unless otherwise noted	
	Registration: March 22–24	Α	Special Events	D	easy ways
Pre-conference sessions are	e extra-fee events. See Box C. On or Befor	e After		access to Exhibit Hall) st pass quantity @ \$85 each	to register
Member Active/Associate/New		\$690	· ·	Monday, March 23 7:30–9:30 PM)	Online* AANN.org/AnnualConference
Student \$300 \$400 Nonmember		Subtotal D \$		Mail	
Nonmember Nonmember Student					AANN Annual Conference PO Box 88019
Register and Join (includes 1-year AANN membership)			Non-CE Clinical Symposia The symposia are included in your registration. Space will be assigned on a first-		omenge, in course its is
Active Membership \$732 \$832 (Open to registered nurses [RNs])			come, first-served basis. Preregistration is required. These sessions are for full-conference attendees only. AANN reserves the right to cancel or reschedule symposia. Phone* 847.375.4733, 888.557.2		
Associate Membershi		\$800	(SY1) Afternoon symposium, Saturda	Mon-Fri, 8:30 am–5 pm CT	
	nals who care for neuroscience patients)	# 700	(SY2) Morning symposium, Sunday,	Fax* 847.375.6430	
New to Neuro Membe		\$782 \$472	(SY3) Afternoon symposium, Sunday	•	If you fax this form, please do not mail the original.
Student Membership (Open to those who gradua	ated from nursing school [not an advanced deg	ree program] in the last 3	(SY4) Morning symposium, Monday, For more information about CE and non-CE syn		*credit card payment only
years, are new to nursing, or are new to working on a neuro unit or caring for neuro patients) Subtotal A \$			Payment must accompany registration.		
4 Day Masting F	Podložnošiom	В	Additional Requests	E .	rogionationi
1-Day Meeting Registration For registrants attending 1 day of the meeting only; indicate which day you will attend.		(DIS) I do not wish to have my name and contact information included in the on-site attendee list.		Cancellation Policy: ALL CANCELLATIONS MUST BE MADE	
Sunday only Monday only Tuesday only			(SA) I require additional accommodations. Please contact me. IN WRITING. A \$100 prod		
	On or Before 2/25/2026 Af		(XXX) I will need vegetarian meals. (SDN) I require dietary accommodations. (Please specify.)		will be charged for all cancellations postmarked more than 14 days
Member Register & Join	\$315 \$457	\$415 \$557			before the event. No refunds will be made under any circumstances
negister & Julii	Φ437	φυυτ			on cancellations postmarked after March 6, 2026.
	Subtotal I	3 \$			AANN reserves the right to substitute faculty or to cancel or
Pre-Conference S	Sessions: Saturday, March 21		C Total	G	reschedule sessions because of low
	•	N Members Nonr	-ambara	_	cumstances. If AANN must cancel the entire conference, registrants
9 am-4 pm Stroke C	oordinator Boot Camp (001)	\$150	\$200 A \$		will receive a full credit or refund of their paid registration fee. No
9 am-4 pm SCRN Re	eview Course (002)	\$150	\$200	Total \$	refunds can be made for lodging, airfare, or any other expenses relat-
		Subtotal C \$		ισται ψ	ed to attending the conference.
If rebilling of a credit c I authorize AANN to ch by AANN to be accurat	accompany registration form) VISA ard charge is necessary, a \$25 procession in the above-listed credit card an ambee and appropriate. will be charged for all credit card payments.	ng fee will be charged. Dunt reasonably deemed	Check (enclosed) • Make checks payable to AANN. • Checks not in U.S. funds will be returned. • A charge of \$25 will apply to checks returned for insufficient funds. Expiration date		Photography, video, and information disclosure: Photographs and videos may be taken of participants. These are for AANN's use only and may appear on AANN's website, in printed brochures, or in other promotional materials. Information related to your attendance may be shared with conference vendors. Attendee registration constitutes consent for AANN's use
Signature			Cardholder's name (Please	unrint)	of these photographs, videos, and information.
· admanne			Caronoider's name (Please		

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