



To register for the Golf Tournament and Training Workshops, visit the [AAMI Store](#).

June 16–19, 2023 | Long Beach, CA  
**Register Early and Save!**

## CONFERENCE REGISTRATION

Register online at [www.AAMleXchange.org](http://www.AAMleXchange.org)

First Name \_\_\_\_\_  
 Last Name \_\_\_\_\_  
 Title/Department \_\_\_\_\_  
 Organization \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Country (if other than USA) \_\_\_\_\_  
 Phone \_\_\_\_\_  
 E-mail \_\_\_\_\_  
 Special needs (accessibility, dietary, etc.): \_\_\_\_\_  
 I am a first-time AAMI eXchange attendee.

### Registrant Profile

#### 1. I work for a (check one box only):

- |  |  |
|--|--|
| <input type="checkbox"/> Active Military       | <input type="checkbox"/> Hospital                    |
| <input type="checkbox"/> CMMS Vendor           | <input type="checkbox"/> Medical Device Manufacturer |
| <input type="checkbox"/> College or University | <input type="checkbox"/> Professional Organization   |
| <input type="checkbox"/> Consultant            | <input type="checkbox"/> Outsourced HTM Department   |
| <input type="checkbox"/> Government Agency     | <input type="checkbox"/> Other _____                 |

#### 2. Job Function (check one box only):

- |   |  |
|---|--|
| <input type="checkbox"/> Biomedical Engineer              | <input type="checkbox"/> IT  |
| <input type="checkbox"/> Biomedical Equipment Technician  | <input type="checkbox"/> Medical Device Cybersecurity Professional |
| <input type="checkbox"/> Clinical Engineer                | <input type="checkbox"/> Nurse                                     |
| <input type="checkbox"/> CEO/President/Executive Director | <input type="checkbox"/> Physician/Surgeon                         |
| <input type="checkbox"/> CISO/CTO/CIO                     | <input type="checkbox"/> Sterilization Professional                |
| <input type="checkbox"/> Consultant                       | <input type="checkbox"/> Student                                   |
| <input type="checkbox"/> Educator                         | <input type="checkbox"/> Other _____                               |
| <input type="checkbox"/> HTM/CE Director                  |  |
| <input type="checkbox"/> HTM/CE Supervisor/Manager        |  |

#### 3. I am currently involved, directly or indirectly, in annual medical-device purchases of (check one box only):

- |  |  |
|--|--|
| <input type="checkbox"/> Less than \$10,000  | <input type="checkbox"/> \$200,001–\$500,000     |
| <input type="checkbox"/> \$10,001–\$50,000   | <input type="checkbox"/> \$500,001–1,000,000     |
| <input type="checkbox"/> \$50,001–\$100,000  | <input type="checkbox"/> \$1,000,001–\$2,000,000 |
| <input type="checkbox"/> \$100,001–\$150,000 | <input type="checkbox"/> Over \$2,000,000        |
| <input type="checkbox"/> \$150,001–\$200,000 |  |

#### 4. I give AAMI permission to share my information and email address with exhibitors (check one box only).

- Yes  
 No

#### 5. I am willing to give a video testimonial for AAMI at the conference.

- Yes  
 No

- Government Employee/Active Military registrants** must provide a valid U.S. federal government employee or military ID upon arrival at the AAMI eXchange 2023 registration desk. Must use a .mil or .gov email address when registering to qualify for the rate.
- Full-Time Student registrants** will be required to present their valid student ID upon arrival at the AAMI eXchange 2023 registration desk. Must use a .edu email address when registering to qualify for the rate.
- Team rates** apply when five or more full-conference paid registrations (excluding students). To be eligible to receive this discount all individuals must be employees of the same company and at the same address.
- Requests for refunds** must be received by Friday, May 5, 2023, and are subject to a \$75 administrative fee. No refunds will be issued for requests received after this date. Refunds will not be issued for “no-shows.”
- Recording/Videotaping Policy and Photo Release** AAMI intends to take photographs and/or videos of the event for the use in future AAMI promotional material, including the AAMI website. By participating in this event, I grant AAMI the right to use any image, photograph, or my voice in its future promotional materials and publicity efforts.

### Registration Fees

#### Full-Conference Registration

	Early Jan. 2023– Apr. 7	Late Apr. 8– Jun. 19
<input type="checkbox"/> AAMI Member .....	\$785	\$890
Member of (check one organization):		
<input type="checkbox"/> ACCE <input type="checkbox"/> JSMI.....	\$785	\$890
<input type="checkbox"/> Non-Member.....	\$995	\$1095
<input type="checkbox"/> U.S. Federal Government Employee/ Active Military <sup>1</sup> .....	\$420	\$525
<input type="checkbox"/> Full-Time Student (student ID required) <sup>2</sup> .....	\$105	\$130
<b>Team Rates</b> (per person):		
<input type="checkbox"/> AAMI Member in team of five or more <sup>3</sup> .....	\$670	\$755
<input type="checkbox"/> Non-Member in team of five or more <sup>3</sup> .....	\$845	\$930

#### One-Day Registration

<input type="checkbox"/> AAMI Member .....	\$420	\$525
Member of (check one organization):		
<input type="checkbox"/> ACCE <input type="checkbox"/> JSMI.....	\$420	\$525
<input type="checkbox"/> Non-Member.....	\$525	\$630
<input type="checkbox"/> Indicate date of your registration:		
<input type="checkbox"/> Sat., Jun. 17 <input type="checkbox"/> Sun., Jun. 18 <input type="checkbox"/> Mon., Jun. 19		

#### Expo-Only Registration

<input type="checkbox"/> Expo Plus Registrant – Member*.....	\$80	\$105
<input type="checkbox"/> Expo Plus Registrant – Non-Member*.....	\$105	\$130
*Includes Expo Hall and Career Center on Saturday & Sunday, plus Main Stage Presentations		
<input type="checkbox"/> Expo Only One-Day Registrant.....		
Includes Expo Hall only for one of the following days (check one):		
<input type="checkbox"/> Sat., Jun. 17 <input type="checkbox"/> Sun., Jun. 18		
<input type="checkbox"/> AAMI Member.....	\$25	\$25
<input type="checkbox"/> Non-Member.....	\$50	\$50

#### RSVP:

- Opening Reception..... Fri., Jun. 16  
 AAMI Party..... Sat., Jun. 17  
 Closing Reception..... Sun., Jun. 18

### Payment Method

Total Amount Due \$ \_\_\_\_\_

Check is enclosed, made payable to AAMI.

**Check must be in U.S. funds drawn on a U.S. bank.**

Charge my:  VISA    MasterCard    AMEX    Discover  
 Card # \_\_\_\_\_

Exp. Date \_\_\_\_\_ CVV # \_\_\_\_\_

Card Billing Address, City, State, Zip Code: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Cardholders Name \_\_\_\_\_

Cardholders Signature \_\_\_\_\_

**Mail, email or fax form to:**  
 AAMI eXchange 2023 Registrar  
 901 N. Glebe Rd, Ste 300  
 Arlington, VA 22203

**Fax:** 703-276-0793  
**Phone:** 703-525-4890  
**Email:** [exchange@aami.org](mailto:exchange@aami.org)