

Ways To Register

BY EMAIL: BY FAX: BY MAIL:

eLearning@aabb.org +1.301.215.6533 AABB eLearning

P.O. Box 791251 Baltimore, MD 21279 USA

Questions? Email eLearning@aabb.org Call +1.301.215.6482

Leadership Certificate in Blood Banking and Transfusion Medicine Institutional Registration Form

Please complete all sections of this registration form. Incomplete forms may delay processing. Individual registration is available on the AABB Store.

Institution Information (all fields are required)

Facility Name				
Street Address				
Street Address 2				
City				
State/Province			Zip	
Country (if other than USA)			·	
	nstitutional ion Number			
II. Primary Contact Information				
Name				
Email				
Phone				
III. Payment Information (Full payment must accompany registration form)				
Total Number of Students				
Total Amount	\$			
O Check Enclosed (payable to AABB and in US currency)				
O Visa/MasterCard	O Diners Clu	b O Disc	over O	American Express
Credit Card #				
Expiration Date				
Name on Card				
Billing Address				
Billing Address Cont'd				
Signature				

REGISTRATION FEES

Institutional Member	\$879
Institutional Nonmember	\$1,159
Bulk Institutional Member*	\$748/person
Bulk Institutional Nonmember*	\$985/person

*Bulk Discount: a 15% discount is included for purchases of 4 or more registrations off the regular price (price per student reflected above; 4 or more students must be provided at the same time). The price per student will be determined by the institution's AABB membership status.

CANCELLATION POLICY

All cancellations must be made in writing and sent to eLearning@aabb.org. Cancellations received before the student(s) accesses the program will receive a full refund. There will be no refunds for cancellations after the program has been accessed.

IV. Student Information

Provide first name, last name and email address for the student(s) you have purchased the program for. AABB will create an account for each student and they will receive an email notification with instructions to access the AABB Education Platform at http://education.aabb.org. All student accounts will be set up under the Facility Name and address provided on this form (unless they have an account already in our

If you have more than 10 students, please provide the following information for each student in an excel file and email with this registration form to eLearning@aabb.org. All fields are required.

	1	1
First Name	Last Name	Email