

A. PERSONAL INFORMATION *One person per form; please print legibly.*

First Name/MI _____ Last Name _____ Phone _____
 Degree/Credentials _____ Fax _____
 Mailing Address _____ E-mail _____
 City _____ State _____ Zip/Postal Code _____ Are you an AAGP member?
 Country _____ Yes No

B. FULL REGISTRATION OR ONE-DAY REGISTRATION

Full Registration—Fee includes admission to educational sessions, Presidential Plenary, exhibit hall, and one copy of meeting materials.

On or before Jan. 21, 2009 **After Jan. 21, 2009**

AAGP Members (Full and Retired)	B01	<input type="checkbox"/>	\$415	B02	<input type="checkbox"/>	\$495
Non-member physicians and PhDs	B03	<input type="checkbox"/>	\$635	B04	<input type="checkbox"/>	\$715
Non-physician/non-PhD professionals	B05	<input type="checkbox"/>	\$495	B06	<input type="checkbox"/>	\$575
AAGP Affiliate Members	B07	<input type="checkbox"/>	\$315	B08	<input type="checkbox"/>	\$395
Members-in-Training/Student Members*	B09	<input type="checkbox"/>	\$175	B10	<input type="checkbox"/>	\$245
Non-member Residents/Students*	B11	<input type="checkbox"/>	\$195	B12	<input type="checkbox"/>	\$265

* Medical Student Year _____ Resident Year _____ Residents and full-time students must mail or fax a photocopy of their student identification card when submitting this registration form to be granted the resident/student rate.

One-Day Registration—Fee includes admission to educational sessions, exhibit hall and AAGP social functions on the day registered. Also includes one copy of meeting materials.

On or before Jan. 21, 2009 **After Jan. 21, 2009**

Members	Friday, March 6	B13	<input type="checkbox"/>	\$225	B14	<input type="checkbox"/>	\$275
	Saturday, March 7	B15	<input type="checkbox"/>	\$225	B16	<input type="checkbox"/>	\$275
	Sunday, March 8	B17	<input type="checkbox"/>	\$225	B18	<input type="checkbox"/>	\$275
Non-members	Friday, March 6	B19	<input type="checkbox"/>	\$245	B20	<input type="checkbox"/>	\$295
	Saturday, March 7	B21	<input type="checkbox"/>	\$245	B22	<input type="checkbox"/>	\$295
	Sunday, March 8	B23	<input type="checkbox"/>	\$245	B24	<input type="checkbox"/>	\$295

C. INTENSIVE WORKSHOPS (Thursday, March 5)

Please register for only **one of these workshops**, as they are concurrent. Includes admission only to Intensive Workshop and exhibit hall grand opening.

On or before Jan. 21, 2009 **After Jan. 21, 2009**

2009 Clinical Practice Management Symposium

AAGP Members and Affiliates	CA1	<input type="checkbox"/>	FREE*	CA2	<input type="checkbox"/>	FREE*
Non-members	CA3	<input type="checkbox"/>	\$100	CA4	<input type="checkbox"/>	\$125

Review in Geriatric Psychiatry: Preparation for Subspecialty Examinations

AAGP Members and Affiliates	CB1	<input type="checkbox"/>	\$265	CB2	<input type="checkbox"/>	\$315
Non-members	CB3	<input type="checkbox"/>	\$325	CB4	<input type="checkbox"/>	\$355

Neuroscience Teaching Day

AAGP Members and Affiliates	CC1	<input type="checkbox"/>	FREE*	CC2	<input type="checkbox"/>	FREE*
Non-members	CC3	<input type="checkbox"/>	\$50	CC4	<input type="checkbox"/>	\$60

Sleepy, Grumpy, and Dopey: Responding to Late-Life Sleep Disturbance is More Than a Fairytale

AAGP Members and Affiliates	CD1	<input type="checkbox"/>	FREE*	CD2	<input type="checkbox"/>	FREE*
Non-members	CD3	<input type="checkbox"/>	\$50	CD4	<input type="checkbox"/>	\$60

* If registered for entire meeting.

D. GUEST TICKETS

Spouse/Partner Registration* DA1 \$175 _____ (# of tickets)

* Includes entry into AAGP social functions, Exhibit Hall, and non-ISS symposia.

Spouse/Partner name for badge _____

Presidential Plenary** Adult DB2 \$85 _____ (# of tickets)

Child (under 13) DB3 \$35 _____ (# of tickets)

** One ticket is included with each Full and Spouse/Partner Registration.

Exhibit Hall Only (no ticket needed if under 18 years;

waiver must be signed onsite) DC4 \$40 _____ (# of tickets)

E. GMHF ACTIVITIES

Contribute to the Geriatric Mental Health Foundation, AAGP's consumer-education arm, while registering for the meeting. All donations are tax deductible to the extent allowed by law.

\$25 \$50 \$100 Other \$ _____

Evening Luau on the Lagoon Green, March 7, 6:30 PM–9:00 PM

Adult E01 \$90 _____ (# of tickets)

Child Ticket (4–12 years) E02 \$45 _____ (# of tickets)

F. AAGP-PAC ACTIVITIES (U.S. Citizens or Permanent Resident Aliens)

Evening Reception aboard the Battleship Missouri Memorial in Pearl Harbor, March 6, 6:00 PM–9:00 PM

AAGP members entitled to one ticket for each \$125 AAGP-PAC contribution between Sept. 1, 2008–March 1, 2009. Members-in-Training/Student members entitled to one ticket for each \$70 contribution. Members entitled to one child's (under 18) ticket for each additional \$35 contribution (see ad on page 10 for details).

Contribution* F01 \$ _____ * Personal checks or personal credit cards only.

G. 2009 MEMBERSHIP FEES

Become a member and save now! NEW members must include a membership application (page 15 or 16) with this form.

NEW member RENEWING member

Full U.S. or Canadian Member G01 \$260

Full Retired Member (former Full Member only) G02 \$130

Full International Member (see page 14 for details)

HI/UMI G03 \$270 HI/UMI Online AJGP G04 \$210

LMI G05 \$100 LI G06 \$50

Member-In-Training G07 \$75

AAGP Affiliate G08 \$190

AAGP International Affiliate (see page 14 for details)

HI/UMI G09 \$200 HI/UMI Online AJGP G10 \$165

LMI G11 \$80 LI G12 \$40

H. METHOD OF PAYMENT

All payments must be made in U.S. dollars and drawn on a U.S. bank. AAGP cannot assume fees for foreign bank transfers.

TOTAL ENCLOSED \$ _____

Check (enclose check made payable to AAGP)

Credit card (choose one): VISA MasterCard AmEx

Acct # _____ Exp. _____

Signature _____

Please return form with payment (postmarked or faxed by **February 12, 2009**) **BY ONE METHOD** to:

Mail

AAGP Meeting Registration
P.O. Box 758978
Baltimore, MD 21275-8978

Fax (Credit card only)

301.654.4137

OR Register online

www.AAGPmeeting.org