29th Annual Conference Registration Form
Westgate Las Vegas Resort
Las Vegas, NV

September 25 - September 27, 2020 (Friday - Sunday) | Preconference Seminars - September 24, 2020 (Thursday)

Visit the SOCRA Website at www.socra.org for Information on Hotel Accommodations

Registration for: Dr. _____ Mr. _____ Ms. _____

First Name _____________________________ Middle Initial _______ Last Name _____________________________

Degrees _________________________________________ Certifications _________________________________________

Title ____________________________________________

Company / affiliation ______________________________________________________________________________________

Preferred mailing address (check one): Office Residence

Address __________________________________________

City ____________________________________________ State/Postal Area ______________________________

ZIP/ Postal code ______________ Country ______________

Phone ____________________________ Alt. Phone ____________________________

Fax ____________________________ E-mail ____________________________________________

ANNUAL CONFERENCE REGISTRATION

Early Discounted Rate After August 20 AMOUNT

Member $750 $800 ____________

Non Member (includes membership for one year) $825 $875 ____________

Preconference Workshops (Thurs. September 24, 1:00 pm to 5:15 pm) PLEASE ADD $175 ____________

Workshop selection (one):

□ Preparing for the FDA Clinical Investigator Site Inspection (20001a)
□ IRBs & the Informed Consent Process (20001b)
□ Research Administration, Budgeting, Contract Negotiation and Finance (20001c)
□ GCP 101: A Workshop for the New Study Coordinator (20001d)
□ The Ins and Outs of Publishing and Presenting Research Results with Pizzazz (20001e)
□ SOP Development and Implementation (20001f)
□ Legal Issues Involving Researchers, Including Fraud and Misconduct (20001g)
□ Statistics in Clinical Research (20001h)
□ Device Research Regulatory Research (20001i)
□ Project Management & Process Standardization in Clinical Trails (20001k)
□ Risk Based Management Principles and Practices (20001L)
□ Investigator-Initiated Sponsored Research (IISR) (20001m)
□ Optimal Study Start-Up Through Protocol Assessment (20001n)
□ ClinicalTrials.gov Administration (20001o)

TOTAL AMOUNT ____________

□ POSTER COMPETITION ENTRANT CHECK HERE (see www.socra.org for details regarding poster submissions)

⇒ The application for the CCRP Certification Examination (Thursday, September 24) is available on SOCRA’s website and through the SOCRA office.
⇒ In order to be considered for the examination, your application must be submitted prior to August 13.
⇒ Non-member fees include a one year membership in SOCRA.
⇒ Membership fees are processed immediately and are not refundable.
⇒ Fees are in U.S. dollars. Please make checks payable to “SOCRA”
⇒ Checks must be drawn on a U.S. bank or marked “Pay in U.S. Funds”.
⇒ Written cancellation requests received by SOCRA prior to August 31 may receive a $525 refund ($125 for preconference)
⇒ We regret that refunds cannot be issued for cancellations on or after August 31.
⇒ Taping (audio or video) is prohibited unless SOCRA’s written permission has been acquired.
⇒ ADA-This program is accessible to persons with disabilities. Please list any special needs:
⇒ If for any reason this conference cannot be held, SOCRA is not responsible for costs incurred by attendees, such as airfares, or hotel or other reservations.
⇒ SOCRA is an educational non-profit membership organization (corporation) - Federal Tax ID #61 1208981.
⇒ Please consider this form your invoice and please retain a copy as your payment receipt.

If you are registering by credit card, please complete the following and mail or fax to SOCRA (see below).

VISA ___ M/C ___ AMEX ___

Account # ____________________________ Exp. Date _____/_____

Cardholder Printed Name ____________________________ Billing ZIP/Postal Code ______________

Cardholder Signature ____________________________

Register Online at www.socra.org or Send Registration Form to SOCRA:
Email - registration@socra.org or SOCRA - 530 West Butler Ave, Suite 109, Chalfont, PA 18914 U.S.A.
Phone 215 822 8644   Fax +1 215 822 8633   www.SOCRA.org

191008