



Association for the
Advancement of
Blood & Biotherapies

Ways To Register

BY EMAIL: eLearning@aabb.org
BY FAX: +1.301.215.6533
BY MAIL: AABB eLearning
P.O. Box 791251
Baltimore, MD 21279 USA
Questions? Email eLearning@aabb.org
Call +1.301.215.6482

AABB 2024 Annual Meeting On-Demand Institutional Bulk Order Registration Form

Please complete all sections. Incomplete forms may delay processing. Individual registration is available on the [AABB Annual Meeting On-Demand Store](#). Access to sessions is available through December 31, 2026.

I. Institution Information (all fields are required)

Facility Name			
Street Address			
Street Address 2			
City			
State/Province		Zip	
Country (if other than USA)			
AABB Institutional Identification Number (if known)			

REGISTRATION FEES	
Bulk Institutional Member	\$509/person
Bulk Institutional Nonmember	\$594/person
Bulk AABB Premium Corporate Partner	\$479/person

Bulk Discount: a 15% discount (20% for AABB Premium Corporate Partners) is included for purchases of 4 or more learner registrations at the same time (not applicable to purchases of individual sessions, Annual Meeting attendee add-on package or other packages nor student registration). Per person price noted above is reflective of the applicable discount. The price per learner will be determined by the institution's AABB membership status. **A minimum of four (4) registrations must be included.**

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

II. Primary Contact Information

Name	
Email	
Phone	

IV. Learner Information

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

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

III. Payment Information *(Full payment must accompany registration form)*

Total Number of Learners	
Total Amount	\$
<i>A minimum of 4 registrations must be included.</i>	
<input type="radio"/> Visa/MasterCard <input type="radio"/> Diners Club <input type="radio"/> Discover <input type="radio"/> American Express	
Credit Card #	
Expiration Date	
Name on Card	
Billing Address	
Billing Address Cont'd	
Signature (Type Name)	

First Name	Last Name	Email

Thank you for your order. A payment confirmation will be provided via email within 2-5 business days.