

Registration Form



AMGA 2025 ANNUAL CONFERENCE

March 26–29, 2025 | Gaylord Texan | Grapevine, Texas

Please print or type all information. One individual per form please. This form may be photocopied for additional registrants.

Registration Information

Full Name (w/degree if applicable) _____

First Name/Nickname (to appear on badge) _____

Job Title _____

Organization _____

Mailing Address _____

City/State/ZIP _____

Phone _____

Email _____

Assistant's Name _____

Assistant's Email _____

Emergency Contact Name and Telephone _____

I agree, by registering to attend the AMGA 2025 Annual Conference, I will abide by the policies within this brochure, including the Code of Conduct.

I require ADA accommodations, please contact me.

How did you hear about AMGA's conference? _____

General Conference Registration (March 28–29)

	Super Early 12/6/24	Early 12/7/24–2/14/25	Advance 2/15/25–3/14/25
AMGA Member/ Corporate Partner	<input type="checkbox"/> \$995	<input type="checkbox"/> \$1,095	<input type="checkbox"/> \$1,295
AMGA Nonmember	(Does not apply)	<input type="checkbox"/> \$1,495	<input type="checkbox"/> \$1,895

Please note: Your conference fee includes the welcome reception on March 27 and activities on March 28–29. The above rate does not include Leadership Council meetings or immersion sessions. Attendees must pay a separate fee for each preconference activity.

Total for Conference Registration \$ _____

Return the completed form to:

Conference Registrar / AMGA
One Prince Street
Alexandria, VA 22314-3318

Payment information

Check in the amount of \$ _____ is enclosed.

Please charge \$ _____ to my: Visa MasterCard American Express

Credit Card Number _____ Exp. Date _____ Security Code _____

Cardholder's Name _____

Authorized Signature _____

Preconference Activities

Spring Council Meetings (March 26–27)
(AMGA Medical Group Members Only) \$350

Write in below which Council you are attending:

Women in Leadership Council (March 26)
(AMGA Medical Group Members Only) \$150

Immersion Sessions (March 27)

AMGA Member/Corporate Partner
Early Bird (Through 2/14/25) \$395

AMGA Member/Corporate Partner
Onsite (2/15/25 – Onsite) \$495

AMGA Nonmember
Early Bird (Through 2/14/25) \$695

AMGA Nonmember
Onsite (2/15/25 – Onsite) \$795

Indicate choice of session below:

- Compensation & Operations Semi-Annual Meeting**
- Be a Catalyst: Reduce Barriers Facing Healthcare Professionals to Receive Mental Healthcare**

Spouse/Guest Registration

Guest registration includes access to evening receptions on March 27–29. Breakfasts and lunches for spouses are not included.

Spouse/Guest Fee _____ Complimentary Name _____

Total for Preconference Activities

\$ _____

Discounts

Four (4) or more paid general conference registrations from the same healthcare organization or corporate partner will receive a \$100 per registration discount. Attach all registrations from the same organization to receive the discount.

Conference + Preconference Total (with discounts): \$ _____

Cancellation Policy: Unable to travel to Texas after you've sent in your registration? A cancellation request can be sent to AMGA in writing by **Friday, February 14, 2025**, for a refund less a \$100 processing fee. Cancellations between February 15 and March 14 have the option to obtain a letter of credit less a \$100 processing fee for a future AMGA activity or donation. After March 15, AMGA will review cancellation requests on a case-by-case basis. Substitutions are welcome.

Questions? Contact Adam Powers at 703.842.0772 or registrations@amga.org.