

## 2022 CLINICAL LABORATORY COLLABORATIVE CONFERENCE

Organized by ASCLS-CO and ASCLS-WY

April 21-22, 2022 ~~~ Radisson Hotel, Denver-Aurora, 3155 South Vaughn Way, Aurora, CO 80014

### INSTITUTIONAL, IN-PERSON, REGISTRATION, PAGE 1

Deadline for mail-in, pre-registration: postmark by April 14, 2022.

No Recordings available with this option / No on-site registration available. Pre-registration required

Registration Desk opens at 7:00 AM on Thursday and Friday. Continental breakfast will be available from 7:00-9:00 AM.

Online registration and payment preferred (American Express, VISA, Mastercard and Discover Card) and can be made on the meeting website link at <https://clcconline.org> up to April 18th! 5 to 10 Registrants allowed on one online order, but must include each registrant's name, email, company and title!

The Institutional Registration, In Person, is meant for multiple registrants from one institution with one total payment. Any Individual Registrant is directed to the Individual Registration form. All participants are welcome to visit the vendors in the exhibit hall. General Sessions are numbers 1, 2 and 15 in grey shaded columns.

**Institution:** \_\_\_\_\_ **Address:** \_\_\_\_\_  
Street City State Zip

Contact Person: \_\_\_\_\_ Phone# \_\_\_\_\_ Email: \_\_\_\_\_

\$60/ person/ day \$ \_\_\_\_\_ X\_ # of persons \_\_\_\_\_ = \_\_\_\_\_

Lunches are extra. Indicate below who get the lunches. Exhibits are free without lunch!! # of Th Lunches \_\_\_\_\_, # of Fri Lunches \_\_\_\_\_ X \$ 25.00 each = \_\_\_\_\_

Total = \_\_\_\_\_

- **No lunch tickets** are included with this Registration. Lunches may be purchased for **\$25 each**. Please check the box next to the participants who will be receiving lunch on the grid below, and include a Th or Fri for the day of lunch. **Note: Notify Erika below with any Dietary Restrictions. Exhibits open to all!**
- **Please print each participant's name clearly and include a personal email address so attendee can receive the necessary information for handouts etc.** and place an X in the appropriate boxes for each session the participant will attend. **See page 2 to add more registrant names.**

**DAY 1: Sessions 1-14**

**DAY 2: Sessions 15-27**

Participants Names and personal emails	√Lunch/ Th &/or Fri	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27

Payment by check must be made out to "CLCC, ASCLS", and the completed registration form must be mailed, **postmarked by 4/14/22** to: Erika Buchanan, CLCC 2022, 2625 S. Xanadu Way, Unit F, Aurora, CO 80014. For Dietary Restrictions or Questions, call: (720) 236-3025-cell or by email at: [clccrecordings@gmail.com](mailto:clccrecordings@gmail.com), or Cathy at [tjmjathym@aol.com](mailto:tjmjathym@aol.com)

