



MANY VOICES COMMON MISSION

1. Your Information

Last _____
 First _____ MI _____ Date of Birth _____
 ONS ID# _____ Job title _____
 Work place _____
 Work address _____
 City _____ State _____ Zip _____
 Home address _____
 City _____ State _____ Zip _____
 Country _____
 Phone (H) _____ (O) _____ (C) _____
 Fax _____
 E-mail _____

ONS members receive important updates, information, and member-only savings from ONS and its affiliates via e-mail. Please check here if you do not want to receive these communications.
 You can customize which messages you receive at <https://www.ons.org/email-preferences>.

My contact information may be released to third-party organizations such as conference satellite symposia sponsors and other organizations offering both ONS Congress® and non-ONS Congress events, promotions, or information. Yes No

I need a visa letter to attend the conference.

2. Choose Your Registration Category

Register by March 10, 2022 to save!	EARLY BIRD	FINAL	DAILY
Member/Associate Member	<input type="checkbox"/> \$595	<input type="checkbox"/> \$725	<input type="checkbox"/> 4/28 • \$260 <input type="checkbox"/> 4/29 • \$260 <input type="checkbox"/> 4/30 • \$260 <input type="checkbox"/> 5/1 • \$130
Nonmember	<input type="checkbox"/> \$835	<input type="checkbox"/> \$1,005	<input type="checkbox"/> 4/28 • \$368 <input type="checkbox"/> 4/29 • \$368 <input type="checkbox"/> 4/30 • \$368 <input type="checkbox"/> 5/1 • \$195
*Students/Retired Members	<input type="checkbox"/> \$305	<input type="checkbox"/> \$365	<input type="checkbox"/> 4/28 • \$130 <input type="checkbox"/> 4/29 • \$130 <input type="checkbox"/> 4/30 • \$130 <input type="checkbox"/> 5/1 • \$65

3. Join or Renew Your Membership (Optional)

Select the statement that best describes you.	1 Year
I am a Registered Nurse.	<input type="checkbox"/> \$125
I am a full-time student working towards my RN.	<input type="checkbox"/> FREE
I've been a Registered Nurse for five years or less.	<input type="checkbox"/> \$94
I am a Registered Nurse who is 70 or older.	<input type="checkbox"/> \$75
I am a non-RN nursing professional.	<input type="checkbox"/> \$63
I am a healthcare professional or have a professional interest in oncology nursing.	<input type="checkbox"/> \$125



2022 REGISTRATION FORM

4. Discounted Hotel Reservations (Optional)

Hotel Cancellation Policy:

All reservations must be held with a credit card guarantee valid through May 2022. This guarantee is for arrival only, and a form of payment will be required upon check-in. No checks will be accepted for hotel payment. Reservation changes and/or cancellations are accepted online or in writing via e-mail to ONSCongress@maritz.com until April 5. No cancellations will be taken over the phone. After April 5, conference reservation information will be transferred to the hotel. Please allow the hotel up to 48 hours to have full access to your reservation. If you would like to make any changes or request your hotel confirmation number, please contact the hotel after April 8. All cancellations must be received a minimum of 72 hours to arrival to avoid a penalty charge of one night's room and tax to the credit card provided.

Headquarter Hotels

Anaheim Marriott

- Single or Double: \$303.72
 Triple: \$327.18
 Quad: \$350.65

Hilton Anaheim

- Single, Double, Triple,
or Quad: \$293.84

Hotel rates are per night and include current taxes and fees.

Arrival date _____ Departure date _____

List the names of those you will be sharing a room with (if applicable).

Guest _____

Guest _____

Guest _____

5. Your Total

Sec. 2	\$
Sec. 3	\$
Sec. 4	\$
Total	

6. ONS Congress Terms and Conditions (Required)

I have read and agree to comply with the [ONS Congress Health and Safety Guidelines](#), as is updated from time to time based on changing circumstances and requirements relating to COVID-19 and may require me to present proof of vaccination against COVID-19 and/or proof of negative COVID-19 tests as a condition to entry to ONS Congress. I understand that by attending ONS Congress, I knowingly and voluntarily assume the risk of infection, transmission, sickness, bodily injury, severe illness, or death due to COVID-19.

I have read and agree to the [ONS Congress Terms and Conditions](#), which include an arbitration agreement, a waiver of my right to bring a class action, and a liability waiver and release of claims. I intend that checking this box will have the same legal effect as if my signature were affixed to the [ONS Congress Terms and Conditions](#).

I have read and accept the [Privacy Policy](#), the [ONS Website Terms of Use](#), and consent to the given information being used to contact me about ONS Congress. For more information on the [ONS Congress Health and Safety Guidelines](#) visit: n.ons.org/health-safety

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OFFICE USE ONLY

Code: **CO22PDF**

Date Rec'd _____ Amount _____

Check #/Type _____

7. Your Payment Information

Check (made payable to Oncology Nursing Society) Check

ONS gift certificate # _____ (include w/registration form)

Credit card* Visa MC AmEx Discover

Card number _____

Exp. date _____ CVVC# _____

Name as it appears on card (print) _____

Cardholder signature _____

Cardholder phone _____

*Credit card information is required to guarantee your hotel reservation.

No Refund Policy

No refunds will be issued for the 2022 ONS Congress. If you are registered for ONS Congress, you will have access to recordings of invited sessions and ePosters, and you will be able to earn NCPD through a post-show on-demand viewing period of no less than three weeks if you submit your evaluation by the stated deadline.

Submit Your Registration Now!

Fax**

330-425-4983

Mail**

Mail Stop 125
1375 N. Highway Dr.
Fenton, MO 63099

Phone

866-257-4ONS (toll-free, U.S. and Canada)
412-859-6100 (select option 2 for Customer Relations)
Housing Inquiries: 800-424-5249 and 847-996-5829
(International)

**Please mail or fax forms that contain credit card information.

ONS may share the information you provide on this form with third parties for the purpose of gathering information about your experiences with Congress.

We want to share this event in all media forms and medium with true representations of our community. As a result, attendees of ONS Congress grant to ONS, ONCC, and the Oncology Nursing Foundation the perpetual, irrevocable, and worldwide license, permission, and authorization to use any photographs, videos, or recordings that include their name, appearance, voice, or likeness, waiving rights of inspection, approval, privacy, publicity, and compensation. Attendees acknowledge that ONS will own the exclusive right, title, and interest to photographs, videos, and recordings, free of any claims. Please contact help@ons.org with any questions.

*Only full-time students working toward an RN are eligible for the Student rate. Retired RNs must be at least 70 years old. Early-career professionals are those who have held their RN license for five years or less. Customers who join or register at the discounted rates who are ineligible will be invoiced the difference.