

# GHSA 2026 ANNUAL MEETING REGISTRATION FORM

## CONTACT INFORMATION

FIRST NAME		LAST NAME	
JOB TITLE		ORGANIZATION	
ADDRESS	CITY	STATE	ZIP
PHONE		EMAIL	
SPECIAL NEEDS (Dietary restrictions, ADA accommodations, etc.)			

## FEES: SELECT THE APPROPRIATE RATE BELOW

	On or Before 7/10	7/11 to 8/22	On or After 8/23
<b>GHSA Members/Associate Members</b>	<input type="checkbox"/> \$790	<input type="checkbox"/> \$950	<input type="checkbox"/> \$1,060
<b>Nonmembers/Federal Employees</b>	<input type="checkbox"/> \$950	<input type="checkbox"/> \$1,060	<input type="checkbox"/> \$1,160

## PAYMENT

Credit Card - Type        

Card # \_\_\_\_\_ CVV \_\_\_\_\_ Exp. Date \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Print Name \_\_\_\_\_

Check/Money Order (Please attach, make payable to GHSA, Federal ID #521021004). Checks must be received by Friday, July 10 in order to qualify for the early bird rate.

Please call our receivables department at 202-580-7932 or email [wpetrash@ghsa.org](mailto:wpetrash@ghsa.org) if you would like to pay by ACH or wire transfer.

## POLICIES, WAIVERS AND DISCLAIMERS

I have read and accept the registration policies, waivers and disclaimers at [www.ghsa.org/annual-meeting-policies](http://www.ghsa.org/annual-meeting-policies). Initial here: \_\_\_\_\_

### Return completed form & payment to:

**GHSA 2026**  
660 N. Capitol St., NW – Ste. 220  
Washington, D.C. 20001

### Questions?

Contact **Kerry Chausmer**,  
[kchausmer@ghsa.org](mailto:kchausmer@ghsa.org)