

# Registration Form



## AMGA 2026 ANNUAL CONFERENCE

April 15-18, 2026 | Mandalay Bay | Las Vegas, NV

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 \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Email \_\_\_\_\_

Assistant's Name \_\_\_\_\_

Assistant's Email \_\_\_\_\_

Emergency Contact Name and Telephone \_\_\_\_\_

I agree, by registering to attend the AMGA 2026 Annual Conference, I will abide by the policies for the conference, including the Code of Conduct.

I require ADA accommodations, please contact me.

How did you hear about AMGA's conference? \_\_\_\_\_

Why did you choose to attend? \_\_\_\_\_

Is this your first AMGA Conference? \_\_\_\_\_

### General Conference Registration (April 15-18)

	Early Through 2/27/26	Advance 2/21/26-4/3/26
AMGA Member/Corporate Partner	<input type="checkbox"/> \$1,095	<input type="checkbox"/> \$1,295
AMGA Nonmember	<input type="checkbox"/> \$1,495	<input type="checkbox"/> \$1,895

**Please note:** Your conference fee includes the welcome reception on April 16 and activities on April 17 and 18. 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 (April 15-16)

(AMGA Medical Group Members Only)  \$350

Write in below which Council you are attending:  
\_\_\_\_\_

#### Women in Leadership Council (April 15)

(AMGA Medical Group Members Only)  \$150

#### Immersion Sessions (April 16)

AMGA Member/Corporate Partner  
Early Bird (Through 2/27/26)  \$495

AMGA Nonmember  
Early Bird (Through 2/27/26)  \$695

#### Indicate choice of session below:

**Compensation & Operations  
Semi-Annual Meeting**

**More Than Medicine: Integrating Culture,  
Compassion, and Equity in Chronic Care**

### Spouse/Guest Registration

Guest registration includes access to evening receptions on April 16-18. Breakfasts and lunches are not included.

Spouse/Guest Fee  \$25

Name \_\_\_\_\_

### Indicate choice of optional excursion (\$100 per person, per activity):

Trail & Tranquility

Hoover Dam Experience

When the Mob Ran Las Vegas

### 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 Las Vegas after you've sent in your registration? A cancellation request must be sent to AMGA in writing by **Friday, March 20, 2026** for a refund less a \$100 processing fee. After March 20, AMGA will review cancellation requests on a case-by-case basis. Substitutions are welcome if you cannot attend.

**Questions?** Contact Adam Powers at 703.842.0772 or [registrations@amga.org](mailto:registrations@amga.org).