Substitution Form

Please use this form to transfer an AER19, SBER19, or Virtual Meeting registration from one person to another. Only substitution requests submitted via this form will be accepted. Upon completion, please email this form to registration@primr.org, fax it to 617.423.1185, or mail it to 20 Park Plaza, Suite 720, Boston, MA 02116. Please contact us by phone at 617.423.4112, ext. 0, or via email at registration@primr.org if you have any questions.

Contact Information

Original Registrant Information

Name, Degree(s): ____________________________________________
Title: _______________________________________________________
Institution/Company: __________________________________________
Address: _____________________________________________________
City/State/Zip/Country: _________________________________________
Phone: ___________________________ Fax: _______________________
Email: ____________________________

Substitute Information

Name, Degree(s): ____________________________________________
Title: _______________________________________________________
Institution/Company: __________________________________________
Address: _____________________________________________________
City/State/Zip/Country: _________________________________________
Phone: ___________________________ Fax: _______________________
Email: ____________________________

Substitute registrants must also complete the registration form for AER19, SBER19, and/or Virtual Meeting. These completed forms can also be faxed, emailed, or mailed to PRIM&R to the attention of Conference Registration.

Substitution Policy

Substitutions may be made at no cost by completing and returning this form by 5:00 PM ET on November 1, 2019. After November 1, 2019 substitutions are subject to a processing fee ($75 for PRIM&R members; $100 for nonmembers). Substitutions must be faxed, emailed, or mailed to PRIM&R to the attention of Conference Registration. Once your registration substitution is complete, a confirmation email will be sent from PRIM&R. Please keep this email for your records.

Signature ___________________________ Date _______________________
Print name ____________________________