

2026 HAPS Annual Conference Late Registration Form

Name (as you'd like printed on name badge)		Guest Name (if applicable)	
E-mail Address		Phone Number	
Institution			
Street Address			
City		State/Province	Zip/Postal Code
Menu Options: <input type="checkbox"/> Regular <input type="checkbox"/> Vegetarian <input type="checkbox"/> Vegan <input type="checkbox"/> Gluten-free <input type="checkbox"/> Other			
If other, please list your dietary restrictions: _____			
I will need the following accommodations in order to participate:			
What is the first HAPS Annual Conference you attended?			
Is this your FIRST HAPS Annual Conference? If so, you are invited to attend a FREE First Timers' Breakfast. Please CHECK IF YOU WILL ATTEND. <input type="checkbox"/> Yes <input type="checkbox"/> No			
Is this your SECOND HAPS Annual Conference? If so, you are invited to attend a FREE Second Timers' Breakfast. Please CHECK IF YOU WILL ATTEND. <input type="checkbox"/> Yes <input type="checkbox"/> No			
Do you plan to retire in the next 12 months? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, do you give HAPS permission to announce this at the upcoming HAPS Conference? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Do you plan to attend the workshops at the Kansas City Kansas Community College? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, which day(s) do you plan to attend? <input type="checkbox"/> First Day <input type="checkbox"/> Second Day <input type="checkbox"/> Both Days			
Will you be using the bus transportation provided by HAPS for workshops? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Would you like to be included on the electronic attendee list? This list will be distributed on the Conference App and given out to participating Exhibiting Companies. <input type="checkbox"/> Yes <input type="checkbox"/> No			
HAPS sends communications about the society via email. You must opt-in to receive communications about the society, including announcements from the President, conference details, election notices, etc. If you do not opt-in, you will receive no communications from the society. <input type="checkbox"/> Yes, I want to receive email communication from HAPS			
I have read and understand the HAPS Code of Conduct posted here: https://www.hapsweb.org/haps-code-of-conduct/ <input type="checkbox"/> Yes			

HAPS – Communicable Disease Policy

Any public space where other people are present holds an inherent risk of exposure to COVID-19 and other communicable diseases. By attending this event, I agree to voluntarily assume all risk related to exposure and agree to not hold HAPS or any of their affiliates including partners, sponsors, directors, officers, employees, agents, contractors, volunteers, or sponsored venues liable for illness. HAPS will be following any CDC guidance as it relates to mitigating COVID. Please stay tuned to the HAPS website for more information.

I have read the HAPS Communicable Disease Policy.

HAPS Code of Conduct: Please review the updated HAPS Code of Conduct (<https://www.hapsweb.org/page/codeofconduct>) and answer below:

I have read the policy and agree to the terms

Emergency Contact

Name:	Relationship to Individual:
Phone Number:	

Late Rate Registration Prices

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Registration Categories	Entire Conference	Update Seminar Only	Workshop Only
Member – Regular	\$510 <input type="checkbox"/>	\$435 <input type="checkbox"/>	\$385 <input type="checkbox"/>
Non-Member - Regular	\$620 <input type="checkbox"/>	\$545 <input type="checkbox"/>	\$495 <input type="checkbox"/>
Undergraduate – Member	\$295 <input type="checkbox"/>	\$270 <input type="checkbox"/>	\$240 <input type="checkbox"/>
Undergraduate – Non-Member	\$315 <input type="checkbox"/>	\$290 <input type="checkbox"/>	\$260 <input type="checkbox"/>
Graduate Student – Member	\$305 <input type="checkbox"/>	\$280 <input type="checkbox"/>	\$250 <input type="checkbox"/>
Graduate Student – Non-Member	\$335 <input type="checkbox"/>	\$310 <input type="checkbox"/>	\$280 <input type="checkbox"/>
Post-doc - Member	\$315 <input type="checkbox"/>	\$290 <input type="checkbox"/>	\$260 <input type="checkbox"/>
Post-doc - Non-Member	\$355 <input type="checkbox"/>	\$330 <input type="checkbox"/>	\$300 <input type="checkbox"/>
Emeritus Member	\$395 <input type="checkbox"/>	\$340 <input type="checkbox"/>	\$295 <input type="checkbox"/>
Guest - Guests may only attend evening social functions and have access to the Exhibit Hall. Guests cannot attend workshops			
	\$150 <input type="checkbox"/>		

<p><u>Entire Conference Registration Covers:</u> Welcome Cocktail Hour (5/23) Breakfast (5/24 - 5/27) Drinks with Exhibitors (5/24) Coffee Break (5/24 - 5/25) Closing Cocktail Hour (5/25) Lunch (5/26 - 5/27) Transportation to/from Workshops (5/26 - 5/27)</p>	<p><u>Update Only Conference Registration Covers:</u> Welcome Cocktail Hour (5/23) Breakfast (5/24 - 5/25) Drinks with Exhibitors (5/24) Coffee Break (5/24 - 5/25) Closing Cocktail Hour (5/25)</p>
<p><u>Workshop Only Conference Registration Covers:</u> Breakfast (5/26 - 5/27) Lunch (5/26 - 5/27) Transportation to/from Workshops (5/26 - 5/27)</p>	

Additional Options			
HAPS Short-sleeve T-shirt w/ Conference Logo \$30 Quantity _____ Women's Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> 2XL Men's Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> 2XL	HAPS Long-sleeve T-shirt w/ Conference Logo \$30 Quantity _____ Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> 2XL	HAPS Men's Polo Shirt \$40 Quantity _____ Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> 2XL	HAPS Women's Polo Shirt \$40 Quantity _____ Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> 2XL
5/23 ADS Workshop: Morning Session Only - Thoracic Dissection \$100 <input type="checkbox"/> _____	5/23 ADS Workshop: Afternoon Session Only - Abdominopelvic Dissection \$100 <input type="checkbox"/> _____		
5/23 ADS Workshop: All day Session - Thoracic & Abdominopelvic \$150 <input type="checkbox"/> _____			

Billing Information		
<p>FAX to 706.883.8215, e-mail to info@hapsconnect.org or send to: HAPS 251 S. L. White Blvd. LaGrange, GA 30241-2945</p> <p><input type="checkbox"/> A check is enclosed, payable to HAPS Credit Card: <input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> American Express <input type="checkbox"/> Discover Card # _____ Dollar amount to be charged to card US \$ _____00 Exp. Date : _____ Verification Number : _____ Name on card: _____ Billing Address: _____</p>	<p style="text-align: center;">Total Payment Amount</p> <p>I would like to join HAPS or renew my dues (\$110 regular, \$90 contingent faculty/high school, \$20 Undergrad Student, \$30 Graduate Student, \$40 Post-doc, \$55 retired)</p> <p style="text-align: right;">\$ _____</p> <p>Voluntary Donation to HAPS</p> <p style="text-align: right;">\$ _____</p> <p>Total Payment</p> <p style="text-align: right;">\$ _____</p>	

Conference Photo Consent

When you register for the HAPS Annual Conference, you affirmed that you agreed to allow HAPS photographers to record your participation and reproduce

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your likeness in publications, online, etc.

Speaker and Workshop Presentation Policy

HAPS cannot provide PowerPoint presentations or videos from Update Speakers or workshop presenters. If an attendee would like a copy of a speaker or presenter's material, individuals should ask for materials directly from the speaker/presenter if they so desire. Photos and videos of presentations are forbidden without permission from that speaker/presenter. Please contact the HAPS Main Office with any questions you may have.