

Letter of Invitation Request Form

Deadline for Requests: August 1, 2013

Please submit a completed request form and proof of payment for the 2013 ASCP Annual Meeting via email to 2013annualmeetingrequest@ascp.org.

| Name | Country |
|--|------------------|
| Company | Country Code |
| Address 1 | City Code |
| Address 2 | Telephone Number |
| City | Email Address |
| State/Province | Web Site |
| ZIP/Postal Code | - |
| Please remember to include your email address on the form as this is where the personalized letter will be sent. | |
| Confirmation Number: | |
| (Number provided to you upon payment for the 2013 Annual Meeting) | - |

Or attach a copy of the confirmation email you received as proof of payment for the 2013 Annual Meeting.

Cancellations Policy

A full refund will be issued for cancellations received in writing no later than August 30, 2013. Refunds are not issued for cancellations after August 30, 2013. ASCP reserves the right to cancel a program due to circumstances beyond its control or for insufficient registration. Registrants will be notified immediately and allowed to obtain a full refund. The Society is not responsible for penalties incurred as a result of cancelled transportation. Please notify us in advance by contacting ASCP Customer Service at 800.267.2727, option 2; international callers: 312.541.4890; or www.ascp.org/feedback.

A completed Letter of Invitation Request form and proof of payment must be submitted together to ASCP Customer Service via email at 2013annualmeetingrequest@ascp.org

The deadline for requests is August 1, 2013. Requests will be processed within 10 business days after receipt of payment for the 2013 ASCP Annual Meeting and the completed Letter of Invitation Request form. Submit completed forms via email to 2013annualmeetingrequest@ascp.org.



American Society for Clinical Pathology 3462 Eagle Way Chicago, IL 60678-1033

Customer Service: 800.267.2727 International: 312.541.4890