

shm.  
**C**  **NVERGE**  
*Las Vegas*  
**April 22-25 / 2025**

Advanced Learning Courses only on April 22.

	<b>Base Early Bird</b> <i>(Meeting Only)</i>	<b>Premium Early Bird</b> <i>(Meeting + On Demand)</i>	<b>NON-MEMBER</b> <b>Base Early Bird</b> <i>(Meeting Only)</i>	<b>NON-MEMBER</b> <b>Premium Early Bird</b> <i>(Meeting + On Demand)</i>
<b>Physician/Affiliate</b>	\$935	\$1,185	\$1,310	\$1,735
<b>PA/NP/RN/PharmD/ Practice Admin</b>	\$665	\$915	\$880	\$1,305
<b>Resident/Fellow</b>	\$495	\$745	\$599	\$1,025
<b>International Attendees</b>	\$625	\$875	\$725	\$1,150
<b>Student</b> <small>(MED/NP/PA)</small>	\$105	•	\$105	•

Registration rates will increase after February 13, 2025.



## Early Bird Attendee Registration

### Personal Information

First Name		Last Name		Credentials (MD, etc.)
Preferred Name		Suffix (Jr., etc.)	Specialty	
Street Address <input type="checkbox"/> Work <input type="checkbox"/> Home				
City, State/Province, Zip/Postal Code				
Phone		Company/Institution		
Email (Required)			SHM ID # (If Applicable)	

**PLEASE NOTE:** Registration forms that do not include an **email address** will not be processed.

### Not a member of SHM?

Join today to save on SHM Converge and access SHM's suite of member benefits. Visit [hospitalmedicine.org/join](https://hospitalmedicine.org/join).

## Meeting Policies

By submitting the SHM Converge registration form, attendees consent to the following policies:

### Privacy Policy

SHM is committed to protecting the privacy of its members and customers. Our full privacy policy can be viewed at [hospitalmedicine.org/pages/site-policies/privacy-policy/](https://hospitalmedicine.org/pages/site-policies/privacy-policy/)

### Cancellation & Refund Policy

Cancellations must be submitted in writing via fax or email. SHM Converge registration is not eligible for deferral. The postmark, fax, or email date will determine your refund using the following schedule:



**Full Refund**  
(less \$75 admin fee)  
May 31, 2024 - Feb. 13, 2025



**Full Refund**  
(less \$150 admin fee)  
Feb. 14 - March 25, 2025



**No Refund**  
After March 25, 2025

## Payment Information

Event Registration (Rate Selected Above)	+	Service Fee*	\$10.00	=	Total Amount Due
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- Check enclosed (payable to Society of Hospital Medicine). Please remit in U.S. Funds drawn on U.S. bank. For your security, credit card payments can be made **online** or by phone, **800-843-3360**.

### Please mail registrations with check payments to:



Society of Hospital Medicine, Meetings  
P.O. Box 822898, Dept. 200  
Philadelphia, PA 19182-2898



[meetings@hospitalmedicine.org](mailto:meetings@hospitalmedicine.org)



800-843-3360



267-535-2911

I consent to sharing my physical address with SHM Converge 2025 partners for a one-time pre- and post-show communication.  Opt Out

I consent to sharing my email address with SHM Converge 2025 partners for a one-time pre- and post-show communication.  Opt Out

\* We are committed to delivering the top-quality services and products our members have come to expect and also committed to being transparent when assessing respective fees. SHM is not immune to the increasing costs of technology, personnel, and other external fees that are beyond our control. To offset some of these increasing costs, the items you have purchased now come with a small \$10 service charge. Thank you for your support.

\*\* Medical Students, NP and PA Students, and Residents are required to submit a letter from their institution verifying status to complete registration.

The Society of Hospital Medicine is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing education for physicians.