

## 2021 IRB Administrator Mini Boot Camp

### Registration Form

#### Contact Information

Name, Credential(s):

Title:

Institution:

Address:

City/State/Zip:

#### Data & Privacy

PRIM&R and its partners occasionally engage in research activities, such as surveys, to better understand the research ethics field. All invitations will come from PRIM&R; PRIM&R will not share your email address with any external parties. **I want to participate in these research activities:**  Yes  No

*Canadian and EEA/EU Residents Only:* In accordance with Canada's Anti-Spam Law and the General Data Protection Regulation, you must opt in to be added to our mailing list. By checking yes, you are providing express consent to receive messages from PRIM&R, including updates and promotions for PRIM&R products and events. You can withdraw your consent at any time by writing to us at 20 Park Plaza, Suite 720, Boston, MA 02116, or via email at [privacy@primr.org](mailto:privacy@primr.org). **I want to receive email from PRIM&R:**  Yes  No

PRIM&R shares a list of registrants with participating supporters/exhibitors before/after the program (does not include email addresses). **I wish to be included in this list:**  Yes  No

#### Primary Responsibility

<input type="checkbox"/> Advocacy Org. Rep	<input type="checkbox"/> Hospital Administrator	<input type="checkbox"/> Industry Representative	<input type="checkbox"/> Quality Assurance Staff
<input type="checkbox"/> Attorney	<input type="checkbox"/> HRPP/IRB/REC Director/Manager	<input type="checkbox"/> Institutional Official	<input type="checkbox"/> Regulatory Compliance Coordinator/Officer
<input type="checkbox"/> Educator	<input type="checkbox"/> HRPP/IRB/REC Staff (Admin/Coord)	<input type="checkbox"/> IRB/REC Chair	<input type="checkbox"/> Research Administrator
<input type="checkbox"/> ESCRO Chair/Member	<input type="checkbox"/> IACUC Chair	<input type="checkbox"/> IRB/REC Member	<input type="checkbox"/> Research Coordinator/Staff
<input type="checkbox"/> ESCRO Staff (Admin/Coord/Dir/Mgr)	<input type="checkbox"/> IACUC Director/Manager	<input type="checkbox"/> Laboratory Manager	<input type="checkbox"/> Researcher
<input type="checkbox"/> Ethicist	<input type="checkbox"/> IACUC Member	<input type="checkbox"/> Laboratory Staff	<input type="checkbox"/> Student
<input type="checkbox"/> Faculty Member	<input type="checkbox"/> IACUC Staff (Admin/Coord)	<input type="checkbox"/> Media Representative	<input type="checkbox"/> Veterinarian
<input type="checkbox"/> Government Employee	<input type="checkbox"/> IBC Chair/Member	<input type="checkbox"/> Nonaffiliated/Community/Non-Scientific Committee Member	<input type="checkbox"/> Veterinarian Staff
<input type="checkbox"/> Grants/Contracts Officer	<input type="checkbox"/> IBC Staff (Admin/Coord/Dir/Mgr)	<input type="checkbox"/> Policymaker	<input type="checkbox"/> Other:

#### Interest Areas

*PRIM&R uses these to segment our email lists so we can send you the email notifications that are most relevant to you.*

<input type="checkbox"/> Animal Care & Use/Animal Wellbeing	<input type="checkbox"/> Global Research	<input type="checkbox"/> Legal	<input type="checkbox"/> Research Ethics
<input type="checkbox"/> Biosafety	<input type="checkbox"/> Human Subjects Protections — Biomedical	<input type="checkbox"/> Public Policy	<input type="checkbox"/> Stem Cell Research
<input type="checkbox"/> Compliance/Regulatory Affairs	<input type="checkbox"/> Human Subjects Protections — Social/ Educational/Behavioral	<input type="checkbox"/> Responsible Conduct of Research	<input type="checkbox"/> Other:

## Registration Options

	Course 1: The IRB Administrator's Role in the Life Cycle of Protocol Review (August 31, September 7 and 14) only	Course 1 only with Beginner course*	Course 2: Expanding Your IRB Administrator Skills (September 21 and 28, October 5) only	Course 2 only with Beginner course*	Both courses	Both courses with Beginner course*
PRIM&R Member	<input type="checkbox"/> \$325	<input type="checkbox"/> \$300	<input type="checkbox"/> \$325	<input type="checkbox"/> \$300	<input type="checkbox"/> \$650	<input type="checkbox"/> \$600
Nonmember	<input type="checkbox"/> \$424	<input type="checkbox"/> \$399	<input type="checkbox"/> \$424	<input type="checkbox"/> \$399	<input type="checkbox"/> \$848	<input type="checkbox"/> \$798

\*People who registered for the [Exploring the Common Rule: A Guide for Beginners](#) course receive a \$25 discount on each course of the Mini Boot Camp.

[Become a PRIM&R member](#) before registering to take advantage of your first benefit – discounted registration!

## Payment Method & Submission

Purchase Order	<b>PO #:</b> _____ Please include a copy of the purchase order with registration. Your purchase will not be processed until the purchase order is received.
Check	<b>Check #:</b> _____ If you are paying by check, please note that payment is expected before your purchase can be processed. Please make checks payable to PRIM&R. Your purchase will not be processed until the check is received.
Credit Card	<b>AMEX/MC/VISA CC #:</b> _____ Expiration: _____ CVV: _____ Name on Card: _____ <i>Credit card payments are also accepted through our online store at <a href="http://www.primr.org">www.primr.org</a>.</i>

**If paying by check, send your completed recording order form and payment to PRIM&R:**

P.O. Box 849502, Boston, MA 02284-9502

Fax: 617.423.1185

Email: [registration@primr.org](mailto:registration@primr.org)

*Note: Our office at 20 Park Plaza is currently closed due to COVID-19; checks must be sent to our P.O. Box listed above and we cannot accept payments requiring a signature. Please contact [registration@primr.org](mailto:registration@primr.org) if you have questions.*

## Agreement to PRIM&R's Policies

By signing and submitting this order form, I acknowledge that I have read and understand [PRIM&R's Policies](#), and I hereby agree to all terms and conditions as stated.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Demographic Information (OPTIONAL)

Diversity is one of PRIM&R's [nine core values](#). We value and promote the diversity of people, ideas, and opinions, as well as a climate of awareness, inclusiveness, and respect. Collecting demographic information about our constituents is an important step toward promoting diversity, equity, and inclusion (DEI) in PRIM&R. To that end, we would appreciate your response to the following questions, which are currently based on those asked on the US Census.

For more information on PRIM&R's DEI efforts, please visit [our website](#).

<b>Are you...</b>	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Transgender	<input type="checkbox"/> Self-identify: _____ <input type="checkbox"/> Prefer not to say
<b>What is your age?</b>	<input type="checkbox"/> 18-24 <input type="checkbox"/> 25-34 <input type="checkbox"/> 35-44 <input type="checkbox"/> 45-54	<input type="checkbox"/> 55-64 <input type="checkbox"/> 65 or older <input type="checkbox"/> Prefer not to say
<b>Are you Hispanic/Latino (including Spain)?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to say	
<b>If yes, please describe your background (open-ended):</b>		
<b>Regardless of your answer to the prior question, please indicate how you identify yourself.</b>	Check one or more and describe your background: <input type="checkbox"/> American Indian or Alaska Native (including all Original Peoples of the Americas) <input type="checkbox"/> Asian (Including Indian subcontinent and Philippines) <input type="checkbox"/> Black or African American (including Africa and Caribbean) <input type="checkbox"/> Native Hawaiian or other Pacific Islander (Original Peoples) <input type="checkbox"/> White (including Middle Eastern) <input type="checkbox"/> Prefer not to say <input type="checkbox"/> Other (please specify): _____	