



## Industry Observer Registration Category The Aesthetic Society

**Who Qualifies:** Individuals from companies looking to enter the aesthetic space and/or from investment/analyst firms with an interest in aesthetics.

**Fees:** (1) Day: \$1,500, (2) Days: \$3,000, (3) Days: \$3,500

Fees are per person/per company and are limited to two meetings for company representatives. Unlimited for representatives from investment/analyst firms.

**Cancellation Policy:** Refund provided less 10% administrative fee. No Show onsite, no refund.

**\*Requirement:** Submission of a completed registration form (per person/per company) accompanied by a letter verifying position/role within a company/investment firm on company letterhead.

**What is included in the fee:** Access to The Aesthetic Marketplace (exhibits), Scientific Sessions and courses (with the exception of those requiring an extra fee), and Presidential Welcome Reception. For company representatives, you have the option to earn one booth point per Industry Observer badge to be used toward future meeting exhibit booth placement.

**Small Print:** The Aesthetic Society reserves the right to restrict attendance to our meetings. All requests to register as an Industry Observer is subject to an internal review and approval process.

**Approval Process:** All applicants for Industry Observer registration category will be subject to review. Confirmation of meeting registration will be provided within 5 business days.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Badge Name (if different from above): \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**Industry Observer\*** - requires confirmation letter (see above)

☐ Check here if, under the American Disabilities Act, you require specific aids or devices to fully participate in this meeting ☐ Audio ☐ Visual

**Check One:** 1 Day ☐ Friday ☐ Saturday ☐ Sunday  
3 Days

**Total Enclosed:** \$ \_\_\_\_\_

☐ ACH Payments - (must include reference: **INDUSTRY OBSERVER** in payment description). Email completed Bank ACH transaction receipt: [erika@theaestheticsociety.org](mailto:erika@theaestheticsociety.org)

**Bank Name:** Wells Fargo  
**Routing Number:** 122000247

**Account Name:** The American Society for Aesthetic Plastic Surgery, Inc  
**Account Number:** 916017114

☐ Check # \_\_\_\_\_ enclosed. Checks must be made out in US Dollars and made payable to The Aesthetic Society. All checks must be mailed to: The Aesthetic Society, 11262 Monarch Street, Garden Grove, CA 92841

☐ Credit Card Please charge the full amount to: ☐ Mastercard ☐ Visa ☐ American Express

**Credit Card #** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_ **CVV:** \_\_\_\_\_

**Name of Cardholder:** \_\_\_\_\_ **Billing Zip Code:** \_\_\_\_\_

**Submit Form with payment to:**

The Aesthetic Society • 11262 Monarch Street, Garden Grove, CA 92841 USA  
Fax: 562.799.1098 • Phone: 562.799.2356 • email: [hello@theaestheticsociety.org](mailto:hello@theaestheticsociety.org)