

BONENT 2026 Northeast Seminar

Sunday, August 23rd, 2026

REGISTRATION FORM



To Register:

1. Go Online to www.BONENT.org (My Account section) for BONENT members only.
2. OR complete this form.

Please Print clearly (ALL info below is required)

First Name _____ Last Name _____

Address _____ Apt. # _____

City _____ State _____ Zip _____

(_____) _____ (_____) _____
Home Phone _____ Cell Phone _____

Vegetarian Lunch

Email Address (*Required to send your confirmation*) _____

Are you BONENT certified? No; Yes: ID# _____

Check one: Technician; Bio-Medical Technician; Water Specialist; Nurse

Registration Fees

	Early Bird Received by 7/10/26	Regular Received 7/11/26-8/10/26	Late Received 8/11/26-8/18/26 & Onsite	Enter TOTAL
BONENT: Annual Fees are paid up-to-date	\$145	\$155	\$165	
Other	\$155	\$165	\$175	

Refund Policy: A \$50 cancellation fee applies for cancellations received by fax or mail on or before 7/25/26. No refunds after 7/25/26.

PAYMENT

- No Payments by Phone.**
- Keep a copy for your records.**

**CHECK or
Money Order** Please mail your check OR money order (payable to BONENT) with this form to:
→→ BONENT, 100 South Washington St, Rockville, MD 20850

IMPORTANT (Payments by Hospital or Facility): If your employer is to pay your registration fees, be sure to tell them they must receive them by the deadlines noted above.

**CREDIT
CARD**

Quickest Option →→ **FAX** this form with credit card payments to 202-463-1257.
Or: **MAIL** to BONENT address above.

Credit Card Information: AMEX MasterCard VISA

Card Number _____

Expiration Date (Month/Year) _____ / _____ Security Code _____

Cardholder's Signature _____

