

Early Registration Rate Ends: August 18, 2026. Online registration will remain open until September 15, 2026 at the late registration rate.

Completed registration forms should be emailed or mailed to the SRS Office. Online registration is available at www.srs.org/AM26.

Email: meetings@srs.org | Mailing Address: Scoliosis Research Society, 555 E. Wells Street, Suite 1100, Milwaukee, WI, 53202, United States

DELEGATE INFORMATION

SRS ID Number	First (Given) Name	Last (Family) Name	Suffix (Jr, III, etc.)	Degree (MD, PhD, etc.)
Email Address (All correspondence is done by email)				
Assistant/ Company Personnel Email Address				
Institution				
Mailing Address				
City (To appear on badge)		State	Zip/Postal Code	Country (To appear on badge)
Specialty: <input type="checkbox"/> Orthopaedic Surgeon <input type="checkbox"/> Neurosurgeon <input type="checkbox"/> Industry <input type="checkbox"/> Other:				

REGISTRATION CLASS	EARLY REGISTRATION <i>On or before August 18, 2026</i>	61 ST ANNUAL MEETING ADD-ONS		
		CME Add-On	Non-CME Add-On	
SRS Member Physician	<input type="checkbox"/> \$ 1,050	Hibbs Society Meeting Tuesday, October 6 <input type="checkbox"/> \$ 50	Opening Ceremonies & Welcome Reception Wednesday, October 7 <input type="checkbox"/> \$ 0	Delegate Farewell Reception Ticket Friday, October 9 <input type="checkbox"/> \$ 50
SRS Member - Non-Physician	<input type="checkbox"/> \$ 600			
SRS Emeritus Member	<input type="checkbox"/> \$ 600			
Non-Member Physician	<input type="checkbox"/> \$ 1,400	Guest Welcome Reception Ticket: Wednesday, October 7 Guest first/last name: _____	Guest Farewell Reception Ticket Friday, October 9 Guest first/last name: _____	
Non-Member Non-Physician	<input type="checkbox"/> \$ 750			
Resident/Fellow/Medical Student	<input type="checkbox"/> \$ 550			
Delegate from Reduced Rate Country*	<input type="checkbox"/> \$ 550			
Industry Representative	<input type="checkbox"/> \$ 1,450	<input type="checkbox"/> \$ 50	<input type="checkbox"/> \$ 150	

*For information on countries that qualify for reduced rate registration, please click here.

*First time attendee? Email meetings@srs.org to register at a reduced rate

Annual Meeting Final Program

- ☐ I would like to help SRS reduce its carbon footprint and will use a digital only copy of the Final Program (Final Program will be accessible on the mobile app)
- ☐ I would like a hard copy of the final program upon arrival in Sydney \$25

Credit Card Fees

- ☐ SRS is a non-profit organization that spends \$75,000 per year on credit card fees. All credit card payments will be assessed a 3% processing fee to offset this cost to the society. If you would like to opt out of this fee, please un-check the box.

Registration includes admission to the pre-meeting course, lunchtime symposia, scientific sessions, Opening Ceremonies, Welcome Reception, and industry workshops at the meeting venue in Sydney, and access to the recorded content 4-6 weeks following the meeting.

Total Registration & Add-on Fees: \$ _____	USD
Total Credit Card Processing Fee: \$ _____	USD
(Registration fee x 3%)	
Total Fees \$ _____	USD

- ☐ Include me on any published delegate list, including the list provided to corporate supporters so that they may send me information about their products, services, and involvement at the meeting.

Privacy policy: www.srs.org/about-srs/contact-us/privacy-policy

- ☐ Exclude me on SRS emails for future meetings offered by SRS.

Waiver: Submission of this registration form and payment of associated fee serves as agreement by the delegate to release the Scoliosis Research Society, the International Convention Centre Sydney (ICC) and their respective agents, servants, employees, representatives, successors, and assigns, from any and against all claims, demands, causes of action, damages, costs, and expenses, including attorneys' fees, for injury to person or damage to property arising out of attendance at the 61st Annual Meeting. In addition, the delegate hereby grants permission to use his/her likeness in a photograph or other digital reproduction in any and all of its publications, including website entries, without payment or any other consideration, agreeing that these materials will become the property of SRS which has the right to edit, alter, copy, exhibit, publish, or distribute this photo for purposes of publicizing its programs or for any other lawful purpose. Additionally, the delegate waives any right to royalties or other compensation arising or related to the use of the photograph.

SRS Tax ID #23-7181863

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E: meetings@srs.org - Scoliosis Research Society, 555 E. Wells Street, Suite 1100, Milwaukee, WI, 53202, USA

PAYMENT INFORMATION

Checks (U.S. funds drawn on a U.S. bank only) may be made payable and mailed to:
Scoliosis Research Society - 555 E. Wells Street, Suite 1100 - Milwaukee, WI 53202

- ☐ Check (U.S. funds drawn on a U.S. bank only)
or provide credit card information: ☐ Visa ☐ MasterCard ☐ American Express

Card Number	
Security Code	Expiration Date
Name (As it appears on card)	
Billing Address	
City	State
Zip/Postal Code	Country
Signature (I agree to pay according to the credit card issuer agreement)	

Cancellation Policy: Full refunds, less a 10% processing fee, will be granted for the cancellation meeting registrations until August 18, 2026. No refunds will be granted after August 18, 2026. Cancellation and refund requests should be sent in writing via email to meetings@srs.org. Delegates will receive confirmation and refund within 14 days of receipt of their cancellation notice.