2026

SOUTHERN CALIFORNIA CHAPTER OF THE AMERICAN COLLEGE OF SURGEONS

Annual Scientific Meeting Registration Form

January 9–11, 2026 • The Ritz-Carlton Bacara • Santa Barbara, California

Fill out form completely. Please print information clearly.

Your Full Name

Street Address / Suite/Apartment Number (if applicable) | City | State | Zip Code

Cell* | Office Telephone | Email

By providing cell phone, you authorize occasional txt messages from SCCACS regarding the event.

EARLY BIRD REGISTRATION CLOSES ON DECEMBER 12, 2025
Registrations received after that date are automatically charged & the delegate is expected to pay the late registration fee levels.

SPEAKERS & PRESENTERS
All participants involved in the program are expected to register and to pay appropriate fees. All residents/students participating in the program are expected to pre-register.

REGISTRATION OPTIONS

FULL SCCACS CONFERENCE
Includes General Plenary Sessions, Specialty Section Sessions and Social Functions, including Breakfast daily, Friday & Saturday Receptions and lunch both days.

RESIDENTS, STUDENTS & FELLOWS
Includes meeting and all meals and social functions. Advance registration required.

SPOUSE/GUEST REGISTRATION
Includes all meal and social functions as listed.

OPTIONAL ITEMS
SCCACS will be using an event app for the meeting. There is a nominal charge for a printed program book.

ONLINE REGISTRATION AVAILABLE AT WWW.SOCALSURGEONS.ORG

SCIENTIFIC SESSION REGISTRATION

(Check only one)

	EARLY BIRD BY DECEMBER 12	LATE REGISTRATION AFTER DECEMBER 12	AMOUNT DUE
❑ Chapter Member	$460	$510	$
❑ Non-ACS Chapter Member	$675	$725	$
❑ Active Duty Military	$265	$315	$
❑ Residents and Fellows	$100	$125	$
❑ Students	$100	$125	$
❑ Retired Surgeons	$265	$315	$
❑ Daily Registration Fee – Specify Day: _____	$275	$320	$
❑ Spouse (Name: _____)	$ 90	$105	$

OPTIONAL ITEMS

❑ Printed Program Book	$ 20	$ 30	$
❑ 2026 SCCACS Fellow/Associate Dues *(Membership year is Jan-Dec each year. Renew Chapter membership for 2026 or join now for member meeting registration fees. Available to ACS FACS or Associate members – status will be verified.)*	$200	$200	$
❑ 2026 SCCACS Resident Member Dues *(Check here if you are an ACS Resident member and you wish to be SCCACS member as well. ACS Resident membership required – status will be verified.)*	$ 0	$ 0	$
		TOTAL ENCLOSED	$

As it relates to the *Americans with Disabilities Act*, do you require specific aids or services? *(If yes, please attach specifics.)* ❑ Yes ❑ No

DIETARY Please indicate if you have any dietary needs or restrictions including allergies: _____

PAYMENT OPTIONS

PAY BY CHECK
Make checks payable to: "SCCACS" and mail with completed form and payment in full (in US Dollars) to: SCCACS, 2512 Artesia Boulevard, Suite 230, Redondo Beach, CA 90278

PAY BY CREDIT CARD
For credit card payments, please use the online registration form on the SCCACS website – www.socalsurgeons.org or scan the QR code at right to access.

Note: Payment preference is either through the online form with credit card or by check. If you require alternate payment options, please contact the SCCACS office 310-379-8261.

REGISTER NOW

EARLY BIRD REGISTRATION CLOSES ON DECEMBER 12, 2025

After December 12, 2025, late fee rates are **AUTOMATICALLY applied. Payment in full is required for admittance to the meeting.**

CANCELLATION & REFUND POLICY
Cancellations must be received **IN WRITING** by December 26, 2025, to receive a refund. A $50 handling charge will be deducted from all refunds. No refund will be provided for cancellations received after Dec 26, 2025.

MEETING MATERIALS
The final program, name badges and tickets will be available at the SCCACS onsite registration desk.

QUESTIONS? Call 310.379.8261, Fax 310.379.8283, Email – info@SoCalSurgeons.org

PAYING BY CREDIT CARD? SAVE TIME & REGISTER ONLINE AT WWW.SOCALSURGEONS.ORG