



14th ANNUAL SCIENTIFIC SESSIONS OF THE CARDIAC NEURODEVELOPMENTAL OUTCOME COLLABORATIVE

Riverfront Reflections: Bridging Research, Advocacy, and Care in Cardiac Neurodevelopment
September 16-18, 2026 | Chase Center on the Riverfront | Wilmington, DE

Brought to the learner in hybrid format in collaboration with Nemours Children's Health.

One form per registrant. PLEASE PRINT ~ ALL FIELDS ARE REQUIRED

Name _____

Last Name
First Name
Middle Initial
Credentials

Mailing Address _____

City _____ State _____ ZIP _____

Institution _____ City/State _____

Position or Title _____ Specialty _____

Mobile Phone () _____ Alternate Phone Office Home () _____

Email* _____ *E-mail required for confirmation.

If you have not received a confirmation email within seven days of submitting this form, contact cnoc@cardiacneuro.org.

Please indicate whether you will attend in person or virtually (All times are Eastern Time).

I will be attending In person Virtually (Eastern Time Zone)

Your registration will **NOT** be processed without an indication of whether you will attend in person or virtually. You must complete both pages of this form. Both in person and virtual meeting participants will have access to the livestream sessions through the Meeting Guide during the meeting, as well as access to session recordings after the meeting. The deadline for changing your registration type is September 1.

SCIENTIFIC SESSIONS REGISTRATION | Wednesday, September 16 - Friday, September 18

CNOC Member Registration	Through 8/16/26	After 8/16/26	Non-Member Registration	Through 8/16/26	After 8/16/26
<input type="checkbox"/> Physicians	\$550 USD	\$600 USD	<input type="checkbox"/> Physicians	\$600 USD	\$650 USD
<input type="checkbox"/> Psychologists, Advanced Practitioners	\$450 USD	\$500 USD	<input type="checkbox"/> Psychologists, Advanced Practitioners	\$500 USD	\$550 USD
<input type="checkbox"/> Therapists, Nurses, Students/Trainees	\$350 USD	\$400 USD	<input type="checkbox"/> Therapists, Nurses, Students/Trainees	\$375 USD	\$425 USD
People with CHD & Family Members					
<input type="checkbox"/> People with CHD and Family Members In-person (No CME)	\$50 USD	\$50 USD	<input type="checkbox"/> People with CHD and Family Members Virtual (No CME)	COMPLIMENTARY	
Colleagues from a World Bank-defined Low and Middle Income Country (LMIC)					
<input type="checkbox"/> Colleagues from a World Bank-defined Low and Middle Income Country (LMIC)	\$150 USD	\$150 USD	This registration fee does not include continuing education credits, although you will be able to request a Certificate of Attendance. Documentation of residence/work place required (e.g., a photo ID). Please scan/mail/fax with registration.		

Breakout Sessions | Thursday, September 17 from 2:15 pm to 4:00 pm. All topics are offered for in-person and virtual attendees.

<input type="checkbox"/> Clinical Value - Starting Strong, Growing Smart: Collaborative Pathways to Successful and Sustainable Cardiac Neurodevelopmental Programs	<input type="checkbox"/> Research - Research Frontier: Connecting Your Questions to Collaboration
<input type="checkbox"/> Cardiac Newborn Neuroprotective Network (CN3) presents "think-tank"	

PRECONFERENCE WORKSHOP REGISTRATION | Wednesday, September 16, 8:00 am - 12:00 pm ET

Advocacy in Action: Building a National Voice for Cardiac Neurodevelopmental Care

The Pre-Conference Workshop is offered for in-person and virtual attendees.

CNOC Member Registration	Through 8/16/26	After 8/16/26	CNOC Non-member Registration	Through 8/16/26	Through 8/16/26
<input type="checkbox"/> CNOC Member Registration	\$100 USD	\$100 USD	<input type="checkbox"/> CNOC Non-member Registration	\$100 USD	\$100 USD
<input type="checkbox"/> People with CHD & Family Members	Complimentary, but must register to attend		<input type="checkbox"/> Colleagues from a World Bank-defined Low and Middle Income Country (LMIC)	Complimentary, but must register to attend	

Celebration Dinner | Wednesday, September 16, 2026 from 7:00 pm to 9:00 pm | The Delaware Contemporary

\$50 per ticket Registrant Guest(s) # _____
 Guest(s) names: _____ Subtotal @ \$50 per ticket \$ _____

TOTAL AMOUNT DUE: _____

