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5i [i gh(, 2017 — Rosen Shingle Creek, Orlando, FL

ATTENDEE REGISTRATION FORM

3 Easy Ways to Register

INTERNET
www.fhca.org
Register online and receive
immediate confirmation.

FAX*
(850) 681-2075
Credit card payments only.
If faxing, DO NOT mail original form.

MAIL*
FHCA
P.O. Box 1459
Tallahassee, FL 32302

FACILITY INFORMATION

Facility/Organization _____
Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____

PARTICIPANT INFORMATION

1. Name _____
Title _____
Email _____
License No. _____
by Ji `m&(after Ji `m&(
Member \$1) \$ \$200

2. Name _____
Title _____
Email _____
License No. _____
by Ju`m&(after Ji `m&(
Member \$1) \$ \$200

PAYMENT

Check payable to FHCA
Charge my: American Express MasterCard VISA Discover
Card No. _____ Exp. _____
Name _____ Sec. Code _____
Signature _____ Zip Code _____
TOTAL \$ _____

POLICIES

Registration Deadline: Registration closes on A cbXUnžš i `m&((or when the event is full, whichever comes first).
Limited space is available for this event.

**Registrations without payment will not be processed.
Registrations cannot be taken by phone.*

Confirmations: Registration confirmations for our programs are available online. Go to www.fhca.org, click on "Events," then "CMS Requirements of Participation Seminar" for this event.

Onsite Fee: Registrations received after š i `m&(will be made onsite and will be assessed an additional \$50 onsite fee.

Cancellation Policy: A \$30 administrative fee will be charged for each cancellation. No refunds will be given for cancellations received after š i `m&(.

If you have any special requests, please email cmichael@fhca.org by Ju`m&(.

