

Homecare Revenue Cycle Webinar Series

REGISTRATION FORM

AUDIENCE:

Home Health

DATE:

Part 1-January 26, 2010

Part 2-February 23, 2010

Part 3-March 23, 2010

PRICES:

MHA Members: \$150/line/session
\$400/line/series

Non-Members: \$200/line/session
\$550/line/series

REGISTER BY:

5pm on the following:

Part 1 or Series-January 21, 2010

Part 2-February 18, 2010

Part 3-March 18, 2010

REGISTRATION INFORMATION

To ensure your spot in these very important webinars, please fill out the information below, completely, and fax to MHA at (406)443-3894, Attn: Jennifer Wagner

You may also register online at www.mtha.org

REFUNDS Fees will be refunded only if written cancellation is received by MHA by 5 pm on January 25, 2010. Fax written cancellation to MHA at (406)443-3894, Attn: Jennifer Wagner. E-mails and phone call cancellations will not be accepted.

Contact Person: Please fill out the contact information for the person that will be responsible for receiving and

Participant Information:

Facility Name: _____

Contact Name: _____

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Facility Address: _____ City: _____ State: _____ Zip: _____

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Series Selection (see session dates above)

3-Part Series (\$400/\$550) Part 1 (\$150/\$200) Part 2 (\$150/\$200) Part 3 (\$150/\$200)

_____ Number of lines (Check those that apply, up to 2 sessions. If selecting more than 2, select 3-part series)

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A check, payable to MHA is being mailed to P.O. Box 5119; Helena, MT 59604-5119

Please invoice me—MHA Member Facility PO#: _____

FOR INTERNAL USE ONLY: DATE PAID: _____ REGISTRATION ENTERED (DATE): _____ BY: _____

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For questions regarding education, please contact:
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