

2018 SUMMIT REGISTRATION FORM

PAYMENT MUST BE INCLUDED WITH REGISTRATION. The form must be completed in its entirety and submitted with payment. Registration forms submitted without full payment are not complete and individuals will not be registered.

Quick and secure credit card registration is available at leaders4health.org/summit. Online registration saves processing time and instantly confirms your place.

Name _____
Credentials (if used) _____
Position/Title _____
Organization _____
Mailing Address _____
City, State, ZIP _____
Phone _____
Email _____

FEES (please select the appropriate fields)

- | | |
|--|-------|
| <input type="checkbox"/> College Member
<i>(2018 Membership Dues must be current to be eligible for this rate)</i> | \$325 |
| <input type="checkbox"/> Non-Member | \$375 |
| <input type="checkbox"/> Member One Day Registration (Day:) _____ | \$175 |
| <input type="checkbox"/> Non-member One Day Registration (Day:) _____ | \$200 |

(The College accepts MasterCard and Visa payments.)

TOTAL _____

A 10% discount is available to organizations registering three or more individuals at the same time. Please contact Kris Ericson, executive director (kericson@leaders4health.org) for additional information.

CANCELLATIONS

No refunds will be issued after **September 1, 2018**. ALL refunds prior to that time are assessed a \$100 cancellation fee. Substitutions are permitted. Please notify us in writing, ATTN: Lisa Shea (lshea@leaders4health.org), prior to September 17 of substitutions.

PAYMENT INFORMATION

Card Type (MasterCard, Visa): MasterCard Visa

Card Number _____ - _____ - _____ - _____

CVV Code _____ Expiration Date _____ (mm/yy)

Name on Card _____

Signature of Cardholder _____

This form may be faxed with credit card payment to 505-822-5068.

Checks should be made payable to The College for Behavioral Health Leadership and sent with this form to:

The College for Behavioral Health Leadership
Kris Ericson, PhD, Executive Director
7804 Loma del Norte Rd NE
Albuquerque, NM 87109-5419