

## EDUCATION REGISTRATION

Duplicate form for multiple registrations

### Methods of Instruction

August 17-18, 2010

KAHCF Training Center

Name \_\_\_\_\_ Position \_\_\_\_\_

Facility \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Fax \_\_\_\_\_ Email \_\_\_\_\_

### Registration Fee

**\$240 KAHCF Member**

**\$325 Non Member**

### Payment Method

Check Enclosed  Credit Card (enter information below)

Cardholder's Name \_\_\_\_\_ Visa \_\_\_\_\_ MC \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Credit Cardholder Address \_\_\_\_\_

Cardholder Signature \_\_\_\_\_

### Payment and Collection Policy

Members shall pay for conventions or seminars in advance. All registrations must be accompanied by complete payment or a purchase order. Registrations received without payment will not be processed until above conditions are met. If purchase order is used, full payment must be received seven (7) days prior to seminar or convention. Any payment not received prior to the event shall be billed at the non-member rate. All registrations received without payment or purchase order will be invoiced at the time registration is received. If membership dues or any invoices are 90 days in arrears, registration fee for seminar or convention will be charged at the non-member rate unless payment is made in full seven (7) days prior to the seminar or convention.

**Cancellations** must be made in writing and may be faxed or mailed to KAHCF. Cancellations by phone **will not** be accepted. Cancellations **received no later than August 9<sup>th</sup>** will receive a full refund. Cancellations received between August 10<sup>th</sup> and August 16<sup>th</sup> will receive a refund of ½. Registrants who do not attend or who do not complete the full seminar will not receive a refund unless prior written notice is given to the KAHCF office. Cancellations by phone will not be accepted.

Fax or mail completed registration form and payment by August 9th to:

**KAHCF**  
**9403 Mill Brook Road**  
**Louisville KY 40223**  
**Fax: (502) 425-3431**