

The National Association for Home Care & Hospice's
24TH ANNUAL MEETING

WASHINGTON STATE CONVENTION & TRADE CENTER
 OCTOBER 23 - 26, 2005 SEATTLE, WASHINGTON



STEP 1

Primary Registrant's First Name _____ Last Name _____

Title _____ NAHC Member ID# _____

Organization _____

Address _____

City _____ State _____ Zip/Postal Code _____ Country _____

Phone _____ Fax _____

Email _____

PRICE TABLE by Sept. 1, 2005 by Oct. 14, 2005 after Oct. 14

(Circle appropriate fees)

	Member	Non-Member	Member	Non-Member	Member	Non-Member
Full Conference • 1st & 2nd Attendees	\$725	\$1,085	\$835	\$1,260	\$935	\$1,360
Full Conference • 3rd & 4th Attendees	\$545	\$825	\$625	\$945	\$725	\$1,045
Full Conference • 5th thru 9th Attendees	\$365	\$545	\$415	\$625	\$515	\$725
Full Conference • 10th & Above	\$265	\$445	\$315	\$525	\$415	\$625
CHCE Member Full Conference	\$725	\$1,085	\$725	\$1,095	\$725	\$1,095
CEO Leadership School	\$160	\$160	\$160	\$160	\$160	\$160

STEP 2 • Use the Price Table above to determine the fees for each person in your group

	Full Conference	CEO School	Subtotal
1. Primary Registrant	_____	_____	\$ _____
2. First Name _____ Last Name _____ Title _____ Email _____	_____	_____	\$ _____
3. First Name _____ Last Name _____ Title _____ Email _____	_____	_____	\$ _____
4. First Name _____ Last Name _____ Title _____ Email _____	_____	_____	\$ _____
5. First Name _____ Last Name _____ Title _____ Email _____	_____	_____	\$ _____

STEP 3

_____ Check enclosed payable to NAHC

_____ Visa, MasterCard, or American Express. Faxed and online registrations will not be processed without credit card information. Credit cards will be billed immediately

Total Registration Fees (from Step 2 above) \$ _____

Accompanying Person @ \$125 \$ _____

Card # _____ Expiration Date _____

Card Holder's Name _____ Card Holder Signature _____

Acc: Person's Name (General Sessions and Home Care Party Only) \$ _____

TOTAL ENCLOSED

Special Needs _____

Billing address (if different from above) _____

Mail form to:
 NAHC 2005 Annual Meeting
 PO Box 91486
 Washington DC 20090
Fax: 202-547-3660
Online: www.nahc.org
Questions: (202) 547-7424
 meetings@nahc.org