



National Association for Home Care & Hospice

NAHC TELECONFERENCE

archive

Expanding the Continuum of Services: *How to Become a Medicare Part B Physician Provider*

Registration is quick and easy! Register by fax or mail

Fax: (202) 547-3660

Name NAHC ID Number

Agency

Address (Street, City, St, Zip)

Fax Phone

Email (necessary for registration confirmation)

All program handouts will be e-mailed to registrants unless other arrangements are made by calling the NAHC meetings office at (202) 547-7424.

Registration Fee

Part I - The Needs Assessment and Application Process, Held June 9, 2005
 Part II – Operations and Practice Management, Held June 23, 2005
 Both Part I and Part II

Member	Non-Member
\$119 per site	\$170 per site
\$119 per site	\$170 per site
\$215 per site	\$315 per site

Registration Fee Per Site

Registration fee for one(1) call, and one(1) phone connection. You may have an unlimited number of attendees participating at each connection. For additional sites or calls, please complete separate registration forms for each site call.

Methods of Payment

All registration fees must be prepaid in US Dollars. Faxed registrations will not be processed without complete credit card information and credit cards will be billed immediately.

Refunds available only if cancellation received within 48 hours of registration.

Make check payable to NAHC. Mail with completed registration form to:
 NAHC Meetings Office
 P.O. Box 91486
 Washington, DC 20090

**For Fastest Registration,
 Fax Completed Form
 to (202) 547-3660**

Payment Information

Our check is attached
 Please charge our credit card VISA MC AMEX

card number exp. date

cardholder's name as it appears on card cardholder's signature

billing address (if different from above)