



Registration Form

EPI Intensive

DATE _____ APIC MEMBER ID#: _____

* FIRST NAME _____ MIDDLE INITIAL _____ * LAST NAME: _____

CREDENTIALS/DESIGNATIONS (LICENSE, HIGHEST DEGREE, CERTIFICATION) _____ TITLE _____

EMPLOYER/FACILITY NAME _____

* ADDRESS _____

* CITY _____ * STATE _____ * ZIP/POSTAL CODE _____ COUNTRY _____

* BUSINESS PHONE (INCLUDE COUNTRY CODE IF OUTSIDE THE U.S.) _____ FAX NUMBER _____

* E-MAIL ADDRESS _____ * = Required field

Check this box if you need special accommodations due to disability, dietary restrictions, health concerns, or physical challenges. Please e-mail a written explanation of your needs to education@apic.org

COURSE SELECTION

COURSE LOCATION: _____

Course Dates: _____

Please select the appropriate box			
Early Registration Rates		Regular Registration Rates	
Member	Non-Member**	Member	Non-Member**
<input type="checkbox"/> \$975	<input type="checkbox"/> \$1,125**	<input type="checkbox"/> \$1,125	<input type="checkbox"/> \$1,275**

REGISTRATION ENDS AT DEADLINE, OR WHEN CAPACITY IS REACHED.

Please refer to the website for registration and hotel deadlines and details.

Prior to sending in registration form, please check the website to ensure the course has not sold out.

**Non-member registration includes a complimentary one year membership to APIC.

apic.org/Education-and-Events/EPI-Intensive

PAYMENT INFORMATION

Registration not confirmed until payment received by APIC.

CHECK IS ENCLOSED *with registration form*

(PAYABLE TO APIC IN U.S. DOLLARS FROM A U.S. BANK. REGISTRATION IS NOT CONFIRMED UNTIL FUNDS HAVE CLEARED BANKING INSTITUTION. CHECKS MUST BE RECEIVED BEFORE REGISTRATION CLOSES. PLEASE MAIL CHECKS EARLY TO SECURE YOUR SEAT IN THE COURSE.)

CARD # _____ EXP DATE _____

PLEASE CHARGE MY:

VISA MASTERCARD AMEX GOVERNMENT CREDIT CARD

CARDHOLDER NAME (PRINTED) _____

CARDHOLDER SIGNATURE _____

Mail Check & Registration Form with Payments to:

APIC
PO Box 79502
Baltimore, MD 21279-0502

Fax Registration Form with Credit Card Payments to:

APIC's Secure Fax#: 202-454-2590

Cancellation policy: A \$75 cancellation fee will be charged to all cancelled registrations. To receive a refund, requests must be received no later than 5 business days prior to the start of the course. Cancellations must be in writing and received via fax or email. No refunds or credits/transfers will be granted after this deadline. Participants who are "no shows" will not be granted a refund or credit/transfer. Please submit cancellation requests to education@apic.org or via fax to (202) 789-1899.