

Health Care Information Technology 2004

Improving Chronic Disease Care in California

NOVEMBER 18 – 19, 2004

REGISTRATION FORM

HOW TO REGISTER

Fully complete the following (one form per registrant, photocopies acceptable). Payment must accompany each registration. Secure online registration at CaHealthIT.com.

Please type or print

FIRST NAME _____ LAST NAME _____

SIGNATURE OF REGISTRANT - REQUIRED _____

ORGANIZATION _____

TITLE _____

DEPARTMENT _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

DAYTIME PHONE (_____) _____

SPECIAL NEEDS (DIETARY OR PHYSICAL)?

PLEASE SPECIFY: _____

PLEASE PROVIDE FAX NUMBER IN ORDER TO RECEIVE A CONFIRMATION LETTER:

FAX (_____) _____

E-MAIL _____

PAYMENT OPTIONS:

Please enclose payment with your registration and return it to Conference Office, 7790 Barberr Avenue, Yucca Valley, CA 92284, or fax your credit card payment to 760-418-8084. You may also register online at CaHealthIT.com. Federal Tax ID: 91-1892021

- Check/money order for \$195 enclosed (payable to Health Care Conference Administrators)
 American Express Visa MasterCard

ACCOUNT No. _____

NAME OF CARDHOLDER _____

SIGNATURE _____ EXP. DATE / _____

Credit card number must be given to hold registration. If payment is not received by seven days prior to the Conference, credit card payment will be processed. Credit card charges will be listed on your statement as payment to Health Care Conference Administrators, LLC.

REGISTER TODAY!



760-418-8084



Secure online registration at www.CaHealthIT.com



Or mail this form with correct tuition fee (U.S. funds) to: Conference Office, 7790 Barberr Avenue, Yucca Valley, CA 92284

CERTIFICATE OF ATTENDANCE:

Many disciplines require that professionals keep current in their respective fields. A certificate of attendance for continuing education documentation will be provided to attendees.

FOR REGISTRATION QUESTIONS:

Visit www.CaHealthIT.com

Email: Registration@HCConferences.com

Call 800-684-4549 (Continental US, Alaska and Hawaii only) or 760-365-0837 — Mon.-Fri., 9 am - 5 pm Pacific Time.

HOTEL ACCOMMODATIONS:

A special rate of \$159 per single/double per night (plus tax) have been arranged with the Palace Hotel. There are a limited number of rooms available at the special rate. Please make your reservations directly with the hotel and mention the Health Care Information Technology 2004 Conference to receive the reduced rate. Reservations will be accepted until October 18, 2004. After that cut-off date, reservations will be accepted at the hotel's prevailing rate, based on availability.

**Palace Hotel • 2 New Montgomery Street • San Francisco, CA 94105
1 800-325-3589**

TERMS AND CONDITIONS:

Conference program is subject to change. Registrants responsible for own travel, room and board. No refunds given for cancellations or no-shows. Single substitutions from the same organization permitted for whole conference. Substitutions for individual sessions not permitted. Registration constitutes binding agreement between the parties which shall be honored by registrant's bank, credit card company and other third parties.