ORDER FORM – THT Webinars

To order copies of the *THT Webinars*, fax or mail this form with payment to:

BY MAIL:
Texas Healthcare Trustees
P.O. Box 95353
Grapevine, TX 76099-9733

BY SECURE FAX:
512/692-2653

For more information, call: 512/465-1000

Item	Quantity	Member Price	Non-Member Price	Total
Information, Communication and Reporting in Enterprise Risk Management, Part 6		$50	$75	
Is your organization a member of THT? ____ Yes ____ No			Subtotal	
			Sales Tax (8.25%)	
			Grand Total	

Please complete all the following information. Incomplete forms will not be processed. *Required fields

*Name: _____ *Title: _____

*Hospital/Firm: _____ *Department _____

*Address: _____

*City, State, ZIP: _____

*Telephone: _____ Email: _____

PAYMENT

Payment must accompany order. If tax exempt, please fax a copy of the exemption certificate to THT at 512/692-2653.
To mail, send with payment to: Texas Healthcare Trustees, P.O. Box 95353, Grapevine, TX 76099-9733

Check: Make payable to Texas Healthcare Trustees **Credit Card:** ☐ MasterCard ☐ VISA ☐ American Express

Card No.: _____ CVV: _____ Exp. Date: _____

Name on Card: _____ Signature: _____
(must be signed to charge)

Cardholder Billing Address (if different from above): _____

City, State, ZIP: _____