

WEBINAR REGISTRATION

FORM

Leveraging Telemedicine and Telehealth in the COVID-19 Response



Texas Healthcare Trustees
THA Family of Companies

REGISTRATION FEE:

Monday, April 20, 2020
12 - 1 p.m. Central

Accounting Use Only

Webinar #: 20-10-5500-22-7003-xxx (04/20)

- ☐ Member FREE
☐ Non-Member \$100

Total \$ _____

Registration includes one toll-free phone audio connection and one web connection per registered facility. An unlimited number of staff should gather in one room to "attend" and receive continuing education credit. Additional line connections will be billed accordingly. A recording of this program is also included in the cost of registration.

REGISTRANT INFORMATION – Please include all information requested.

Please Print. **Payment must accompany registration form.** Registration price is based on date payment is received.

Name _____

Title _____

Nickname for Badge _____

Organization _____

Address _____

City/State/ZIP _____

Phone _____

Fax _____

Email _____

(*IMPORTANT* All correspondence sent to this email)

☐ Enclosed is my check payable to THA in the amount of
\$ _____. (There will be a \$25 charge on all returned checks.)

Or I authorize THA to charge my credit card:

☐ Visa ☐ MC ☐ AmEx

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(must be signed to charge)

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FAX
512/692-2653

MAIL
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P.O. Box 95353
Grapevine, TX 76099-9733

OVERNIGHT
Texas Healthcare Trustees
1108 Lavaca, Suite 700
Austin, TX 78701-2108

CANCELLATIONS AND SUBSTITUTIONS

Registrants unable to attend may allow an alternate to connect. Transfer from one THT education program to another is not permitted, and no financial credit will be granted. If a registrant cancels, the registration fee, less a 20 percent service charge, is refundable only if THT receives notice in writing no less than five business days prior to the program. (Send notification via e-mail to registrar@tha.org or fax to 512/692-2653). Refunds will be issued only after the program runs and it is verified that the registrant did not access the program.