

52nd Annual Conference & Exposition

Nurturing ENGAGEMENT In Shifting Landscapes

September 24-27, 2016 | GRAPEVINE, TEXAS



REGISTRATION FORM

Submit this form with payment and secure your place for 2016!

Register online at www.ashhra.org/register OR mail this completed form with your check to the address at the bottom of the page.

You may request an invoice via email at ashhra@aha.org.

For more conference information, call (312) 422-3720 or visit www.ashhra.org/annualconference.

1 ASHHRA CONFERENCE ATTENDEE REGISTRATION INFORMATION (please print):

First Name: _____ Last Name: _____ Member ID: _____

Name on Badge: _____ Credentials: _____

Title: _____ Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

2 TELL US A LITTLE ABOUT YOURSELF

CAREER LEVEL*

- New-to-the-Profession
- Mid-Level
- Executive Level

PLEASE INDICATE IF YOU ARE:*

(check ALL that apply)

- New to health care (≤5 years)
- New to HR (≤5 years)
- New Member
- First Time Attendee
- Sponsor
- Hospital
- Health System
- Non-Hospital Facility

REGION*

- REGION 1: CT, ME, MA, NH, RI, VT
- REGION 2: NJ, NY, PA
- REGION 3: DE, DC, KY, MD, NC, VA, WV
- REGION 4: AL, FL, GA, MS, PR, SC, TN
- REGION 5: CAN, IL, IN, MI, OH, WI
- REGION 6: IA, KS, MN, MO, NE, ND, SD
- REGION 7: AR, LA, OK, TX
- REGION 8: AZ, CO, ID, MT, NM, UT, WY
- REGION 9: AK, CA HI, NV, OR, WA,
- NON-US

*Required

3 SELECT YOUR REGISTRATION PACKAGE

	REGULAR <small>Expires 08/19/16</small>	ONSITE <small>Effective 08/20/16</small>
OPTION 1 Conference Package (Sept. 24-27) Full Conference + Pre-Conference		
Member	\$ 950	\$ 1000
Non-Member	\$ 1110	\$ 1160
OPTION 2 Full Conference (Sept. 25-27)		
Member	\$ 800	\$ 850
Non-Member	\$ 960	\$ 1010
OPTION 3 Pre-Conference (Sept. 24) <small>Learning sessions from 8:30 a.m. to 12:30 p.m., and from 2:00 to 4:00 p.m.</small>		
Member	\$ 350	\$ 350
Non-Member	\$ 510	\$ 510
OPTION 4 Student		
Member	\$ 500	\$ 550
Non-Member	\$ 550	\$ 600

Exhibit Hall Guest Badge
Entry into exhibit hall and hall meals only. \$150

Social Event (Sept. 25) Limit 2 tickets per attendee. \$25 each

OTHER PRICING OPTIONS

One-Day Rates

Price includes entry into exposition and learning sessions only.

	SUNDAY	MONDAY	TUESDAY
Member	\$350	\$350	\$175
Non-Member	\$510	\$510	\$335

4 PAYMENT INFORMATION:

Total Amount: \$

- Discount code _____
- Check Enclosed
(Make check payable to ASHHRA 319AM16)
- Request an Invoice
You may request an invoice via email at ashhra@aha.org.

Mail completed form with payment to:

ASHHRA of the AHA
75 Remittance Drive, Suite 1885
Chicago, IL 60675-1885

Credit Card

Register online to pay by credit card:

www.ashhra.org/register

Cancellation Policy: All conference registration cancellations and refund requests must be made in writing to ashhra@aha.org by August 19, 2016. A refund of the registration fee, less a \$100 cancellation fee, will be given for cancellations received by August 19, 2016. Membership dues cannot be refunded in the case of a cancellation. No refunds will be given for requests made after August 19, 2016.