REGISTRATION FORM

The Relationship-Based Care Leader Practicum
Training for Project Leaders and Team Members Driving the Change to Relationship-Based Care

Program Dates: October 23-27, 2017
Location: Minneapolis, MN
Tuition: $2,000 per person ($1,700 per person for teams of 5 or more)

PLEASE RETURN THIS FORM TO: CREATIVE HEALTH CARE MANAGEMENT
6200 Baker Rd Suite 200, Minneapolis, MN 55346
Scan to: askillings@chcm.com or Fax: 952.854.1866

Attendee Information

( ) Registration for 1 participant ( ) Registration for 2 or more participants

Full Name:

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<th>First</th>
<th>Job Title</th>
<th>Work Phone</th>
<th>Email*Needed for class confirmation</th>
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Full Name #2
Full Name #3
Full Name #4
Full Name #5
Full Name #6
Full Name #7
Full Name #8

Facility Name: __________________________________________ Special needs for food: ____________________
Facility Address:_______________________________________

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Payment Information

Enclosed Payment: $ ____________

Payable to Creative Health Care Management

( ) Check coming in mail ( ) Send Invoice/Purchase Order # 

( ) MasterCard ( ) Visa ( ) Amex Credit Card # __________________________

CID Code (see card back): ________ Exp. Date: ________
Card Holder Address: ( ) Same as above

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Authorized Signature: __________________________

Send invoice to/Attn: ( ) Same as Above ( ) Different Address: __________________________

(US addresses only)

Name and Address

Upon receipt of registration, payment must be received within 2 weeks. Space for the class is limited. To avoid cancellation fees, it is required you notify the Creative Health Care Management office if you are not planning to attend and have turned in a registration form.

Details: Please go to www.chcm.com and click on Events/Webinars to locate details on CHCM Education Events. There you will find a link to the participant letter which will provide information on travel and hotel location. If a participant letter is not listed the first time you look; please check periodically for updates.

Questions Contact: Andie Skillings Event Planner Phone: (952) 252-1140 or (800) 728-7766 x120 Email: askillings@chcm.com

Important Note: Two weeks before the class start date, if you need to postpone or reschedule attendance and have paid for the seminar, we will refund your money less $50 for administrative fees. If cancelling your registration less than (2) weeks prior to the start date of the class, you will be charged 50% of the registration fee; the remainder will be refunded.