

Registration Form

(Please print.)

**NC Healthy Aging Summit 2017: Integrated Strategies for Community and Clinical Connections
August 23, 2017**

Event #52895ks

Early Fee - \$40; after July 15, 2017 - \$50

Please check if needed: Vegetarian Meal

4-Digit PIN#:

Dr. | Mr. | Ms. | Mrs.

First Name MI Last

Clinical Specialty Degree(s) (e.g., MD, PharmD, MS, BS)

Home Address City

State Zip Home County Home Phone

Employer Job Title

Work Address City

State Zip Work Fax Work Phone

Department Preferred E-Mail **(REQUIRED)**

By providing your fax number, email address and telephone number, you have granted permission for us to contact you via the numbers and address indicated.

Payment Options Payment of check, credit card or supervisor signature must accompany registration.

Check enclosed. (Make check payable to Wake AHEC.)

Charge my: Corporate Card Personal Card MasterCard Visa AMEX Discover

Card # Exp. Date

Authorized Signature Name as it appears on card

Employer will make payment. Supervisor completes below and fax registration to 919-350-0470.

Supervisor's Name (Printed) (Signature) Phone

By signing, I am certifying that agency payment will follow. If you have a balance due and do not attend or send a substitute, you will be invoiced for the full program fee.

WakeMed Employees Only: An Education, Meeting & Travel Request Form must be submitted with the registration for processing if your department is paying.

Required for all WakeMed Employees if your department is paying

Register online today! www.wakeahec.org
Fax: 919-350-0470
Mail: Wake AHEC, Attn: Kimberly Spencer
3261 Atlantic Avenue, Suite 212
Raleigh, NC 27604-1657

Questions? Contact Kimberly Spencer at kispencer@wakeahec.org or 919-350-0480.

Wake AHEC is part of the North Carolina AHEC Program.