

TRANSFORMING HEALTH:

Community Priorities & Medicaid Transformation

TUESDAY, JUNE 4, 2019



LOCATION

Western Carolina University

AK Hinds University Center (Catamount Rm)
245 Memorial Drive, Cullowhee, NC 28723

DATE

Tuesday, June 4, 2019

REGISTRATION PROGRAM

5:00 pm–5:30 pm (*light dinner provided*)
5:30 pm–8:00 pm

PROGRAM FEE

\$15.00 per person (*\$30.00 if after 5/28/19*)

MEAL PREFERENCE

Vegetarian Gluten-free Vegan

PROGRAM FEE

\$15.00 \$30.00 (*after 5/28/19*)

Full payment must accompany all submitted registrations unless a payment plan has been approved in advance. Registrations received without accompanying payment will not be processed.

REGISTRATION FORM

[CLICK HERE TO REGISTER](#)

Updated contact information below.

NAME _____

CREDENTIALS _____

SOCIAL SECURITY # XXX-XX- _____ (last 4 digits required)

OCCUPATION _____

EMAIL ADDRESS _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME COUNTY _____

HOME # _____ WORK # _____

EMPLOYER _____

DEPARTMENT _____

EMPLOYER'S ADDRESS _____

CITY _____ STATE _____ ZIP _____

WORK COUNTY _____

Program announcements will be sent to your email unless you opt out from receiving MAHEC emails. We never share our mailing lists.

Please remove my name from the MAHEC mailing list.

Check is enclosed Credit card information provided

Visa MasterCard Discover Card American Express

ACCOUNT # _____

EXP ____ / ____ CODE ON BACK OF CARD _____ (3 digits)

NAME ON CARD _____

SIGNATURE _____

MAHEC assumes permission to use audio, video and still images from this program for promotional and educational purposes. Please speak with a staff member if you have any concerns.

Send completed registration form to:

#19ME103/59033

MAHEC Registration

121 Hendersonville Road, Asheville, NC 28803

Fax: 828-257-4768

PROVIDED BY



IN COLLABORATION WITH



EARLY REGISTRATION DEADLINE

#19ME103/59033

Tuesday, May 28, 2019

The \$15.00 registration fee includes administrative costs, educational materials, and a light dinner. If your registration is received after the deadline, the total fee will be the registration fee + \$15.00.

MAHEC has a pay-up-front policy for all CE programs. The only exception is for pre-approved programs where an individual payment plan is appropriate. Registrations received without accompanying payment will not be processed and participants who have not paid the course fee will not be admitted into the program.

Unless otherwise noted in course materials, the following cancellation policy applies to all programs:

- Cancellations must be in writing (via fax, email, or mail)
- Cancellations received more than 2 weeks prior to the event will receive 100% refund
- Cancellations received between two weeks and two full business days prior to the first day of the event are refunded at 70% of the registration fee subject to a minimum \$25 cancellation fee
- No refunds or credits will be given for cancellations received less than two full business days prior to the event
- No vouchers will be issued in lieu of a refund
- Transfers/substitute(s) are welcome (please notify us in advance of the program)

Mountain Area Health Education Center (MAHEC) is an approved provider of continuing nursing education by the North Carolina Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. Participants must attend the entire activity to receive credit.

HAVE A QUESTION? Contact the Program Planner

Lisa Roy, MSW

lisa.roy@mahec.net or 828-257-4491



Special Services

828-257-4468

REGISTRATION INFORMATION

828-257-4475

FAX REGISTRATION

828-257-4768

ONLINE REGISTRATION

www.mahec.net/cpd

EMAIL

registration@mahec.net

MAIL

MAHEC Registration

121 Hendersonville Road, Asheville, NC 28803



Stay connected! Follow us on Facebook: @MAHECEd