

College for Value Based Purchasing

Registration Form

In order to maintain the individualized focus of the College, enrollment is limited, so register as soon as possible. Make a copy of this form and mail or fax to:

Jeannine Kinney, Program Coordinator
Jefferson School of Population Health
1015 Walnut Street, Suite 115
Philadelphia, PA 19107
Fax: 215-923-7583

Session Location and Dates

Today's Date

Last Name First Name M.I.

Preferred Name for name badge

Degrees/Professional Certifications

Personal Title (Dr, Mr, Mrs, Ms) Job Title

Corporation/Institution/Organization

Mailing Address

City State Zip

Telephone Fax Email

Registration fees include the four day program, meeting materials, breakfast, lunch, and snacks each day.

Coalition member: \$1400 (at least four weeks before program) or \$1600 (within four weeks of program)

Non-coalition member: \$1600 (at least four weeks before program) or \$1800 (within four weeks of program)

Payment must be received with registration, or at least 10 days prior to the first day of the program.

Check (Payable to College for Value Based Purchasing)

Credit Card

I hereby authorize the use of my: Visa Mastercard Amount: \$ _____

Account Number Expiration Date

Cardholder's Name Signature

Purchase Order # (if needed) Attention (for invoice)

Mailing Address

City State Zip

Member of a business coalition? Yes No

If yes, Coalition Name

If no, join today and receive \$200 toward your registration. Call 202-775-9300 for more information.