



To Register for MHA's Small or Rural Hospital Conference

February 13-15, 2019

Jordan Grand Resort Hotel & Conference Center

Please fill out and return to the Maine Hospital Association

You may also register with credit card (VISA and Mastercard accepted) online at www.themha.org

Name: _____ Nickname for badge: _____

Title: _____ Institution: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email: _____ Request Certificate of Attendance _____

Guest Information*: _____

*Please Note: there is no registration fee for Guests; however, guests cannot be other organizational employees.

Registration Fee

Early Bird Registration (on or before January 18)

- ___ \$200 MHA Member Hospitals & Affiliates
- ___ \$350 MHA Corporate Affiliate Member
- ___ \$500 Non-Member (payment required w/regist)

Regular Registration Rates (after January 18)

- ___ \$225 MHA Member Hospitals & Affiliates
- ___ \$375 MHA Corporate Affiliate Member
- ___ \$525 Non-Member (payment required w/regist)

Meals

All meals must be ordered below. Be sure to check off Wednesday Dinner's meal choice, if attending.

___ \$45 Dinner Wednesday: Choose an option below

Options: ___ Beef Tenderloin ___ Haddock w/Shellfish Topping ___ Mushroom Risotto

___ \$22 Breakfast Thursday

___ \$25 Lunch Thursday

___ \$20 Boxed Lunch Thursday (Options: ___ Chef Salad (or) ___ Turkey Deli Sandwich

___ \$40 Dinner Thursday

___ \$22 Breakfast Friday

\$ _____ Total Meals

Please list any dietary restrictions: _____

Payment Information

TOTAL DUE: \$ _____

**REGISTRATION DEADLINE:
Friday, February 1st**

Payment Method: Credit Card* Check

*If paying by credit card, you must register online at www.themha.org. Click on the "Register" button found under the [Small or Rural Conference link](#) on the education calendar. We accept VISA and Mastercard. Please contact Leslie Couturier at 207/622-4794 or lcouturier@themha.org if you need log in information.

If paying by check, please fax (207/622-3073) or email (lcouturier@themha.org) this form before mailing with payment. Checks can be made payable to Maine Hospital Association. Mail payment and registration form to: Leslie Couturier, Maine Hospital Association, 33 Fuller Road, Augusta, ME 04330.

Cancellation Policy: Cancellations made prior to the registration deadline will be issued a refund, less a \$50 administrative fee. Cancellations made after February 1st will be charged 50% of the registration fee. No refunds will be issued for those who do not cancel before Wednesday February 13. Participant substitution is permitted.