Print

Registration Form
23rd Annual Oregon Rural Health Conference

November 2-4, 2006 • Newport, Oregon

Full Name _____ What name should we put on your name tag? _____

Address _____ _____ _____ _____

street city state zip

Organization _____ Your title _____ Vegetarian meals:? _____

E-mail _____

Business phone _____ First time attendee? _____ yes _____ no

Conference Registration

(Meals Included in Fee)

Standard registration:

Register by ***October 2***	$180	
Register after ***October 2***	$210	

OR

Special Discounts:

ORHA member	$175	
ORPRN member	$175	
Register 3 or more people from the same organization or clinic *(please submit a separate registration form for each person)*	$175 each	
One day registration	$150	
Student registration	$125	
TOTAL		0.00

(to purchase guest tickets for any meals, contact Linda at pepplerl@ohsu.edu)

Pre-Conference Workshops & Meetings Registration

(Thursday, Nov. 2)

CAH Advisory Committee (10 a.m.– 1 p.m.)	FREE	
Oregon Rural Healthcare Quality Network (1 p.m.– 5 p.m.)	FREE	
Rural Health Clinic Workshop (10 a.m. – 3 p.m.) *includes lunch*	$40	
ORPRN Steering Committee/Business Mtg (5 p.m. – 6 p.m.) – ***ORPRN members only***	FREE	

Payment options

Pay by check

Make checks payable to: Office of Rural Health
Mail to: Oregon Health & Science University
Office of Rural Health; L593
3181 SW Sam Jackson Park Road
Portland, OR 97239-3011

Pay by credit card

Visa _____ **MC** _____ **Fax to: 503-494-4798**

Card # _____

Exp: _____ **V code:** _____
(3-digit code on back of card)

JE Info for OHSU only: Debit line: obj. 6369 **Credit line:** fund 1110, org. 25110, mission 52, obj. 4902

Refund policy: *A full refund will be made on cancellations received prior to October 14, 2006 minus a $30 administrative fee. Refund checks will be mailed after the conference. Refunds will not be made on cancellations received on or after October 14, 2006.* ***Questions? Contact Linda Peppler at 503-494-4450, pepplerl@ohsu.edu or 503- 494-4798(fax).***