

AHP 44th Annual International Conference
OCTOBER 20-23, 2010, SAN ANTONIO, TEXAS
Section A—Registrant Information

Name _____
 Name on Badge _____
 Title _____
 Institution _____
 Address _____
 City _____
 State/Province _____
 Zip/Postal Code _____
 Telephone _____
 Fax _____
 Email _____

(E-mail addresses will only be used for official AHP conference information and will not be shared with conference participants.)

- Check if this is your first AHP annual conference
- Check if **hospital CEO, hospital administrator, hospital trustee, or volunteer, a nonmember CEO/president/executive director of the hospital or organization** (not available for foundation CEOs/presidents/executive director), trustees or volunteer attending with an AHP member from your institution may attend the conference at the member rate. (You must register by paper to receive this discount.) Please list name of the AHP member from your institution with whom you are attending:
- _____

- Please check here if you require special assistance or dietary needs. Please e-mail AHP at ahp@ahp.org with your needs.

Section C—Payment Method

My check is attached in U.S. dollars and made payable to the **Association for Healthcare Philanthropy**

Please charge my Visa MasterCard AMEX

Account Number _____

Expiration Date _____ 3-digit Security Code _____

Signature as it appears on the card _____

SUBTOTAL: PRECONFERENCE \$ _____

FULL CONFERENCE \$ _____ includes Live Learning Center

SINGLE DAY \$ _____

TOTAL \$ _____



Section B—Registration Fees

PRECONFERENCE WORKSHOPS		Early Registration (Postmarked by August 13)	Advanced Registration (Aug. 14-Sept. 24)	Regular Registration (Sept. 25-Onsite)
The Advanced Course (Wednesday, October 20, 8:00 am-4:00 pm)	AHP member	\$290 US	\$340 US	\$390 US
	Nonmember	\$390 US	\$440 US	\$490 US
Development Primer (Wednesday, October 20, 8:00 am-4:00 pm)	AHP member	\$265 US	\$315 US	\$365 US
	Nonmember	\$365 US	\$415 US	\$465 US
HIPAA (Wednesday, October 20, 1:30-4:30 pm)	AHP Member	\$115 US	\$130 US	\$145 US
	Nonmember	\$165 US	\$180 US	\$195 US
SUBTOTAL: Fees for preconference workshops = _____				

Development Professionals

FULL CONFERENCE*
 (Includes Opening Reception, Wednesday, October 20, through Saturday, October 23)

AHP member	\$595 US	\$645 US	\$695 US
Nonmember**	\$1035 US	\$1085 US	\$1135 US

SINGLE DAY ATTENDANCE
 (Please indicate date) October 21 October 22 October 23

AHP member	\$300 US	\$325 US	\$350 US
Nonmember	\$400 US	\$425 US	\$450 US
SUBTOTAL = _____			

*includes access to the AHP Live Learning Center

** If you pay the full conference nonmember rate, you will automatically receive a one-year individual membership to the Association for Healthcare Philanthropy effective from the date of receipt and payment of registration.

OR Non-Exhibiting Consultant Registration***

FOR CONSULTANTS OR INDIVIDUALS WHO REPRESENT FIRMS PROVIDING SERVICES TO HEALTH CARE DEVELOPMENT PROFESSIONALS

*** It is an AHP policy that all AHP affiliate members and prospective members (i.e., vendors, consultants, etc.) must register as an exhibitor or a non-exhibiting consultant. Please visit AHP's Web site at www.ahp.org for an exhibitor registration form.

SPECIAL FEES (***This pricing structure is for small organizations and consulting firms (one- or two-person shop) that would like to participate in the conference but do not want to exhibit/display materials. Companies paying this fee are ineligible to display any marketing materials/job posting at the conference and will not have a company/50-word description in the on-site brochure. This fee includes registration for one person, one set of meal tickets, name listing on the conference attendee list, and one on-site registration list.)

FULL CONFERENCE—NON-EXHIBITING CONSULTANT
 (Includes Opening Reception, Wednesday, October 20, through Saturday, October 23)

AHP member	\$900 US	\$950 US	\$1000 US
Nonmember	\$1100 US	\$1150 US	\$1200 US

SINGLE DAY ATTENDANCE—NON-EXHIBITING CONSULTANT
 (Please indicate date) October 21 October 22 October 23

AHP member	\$425 US	\$450 US	\$475 US
Nonmember	\$525 US	\$550 US	\$575 US
SUBTOTAL = _____			

*includes access to the AHP Live Learning Center

TO REGISTER

Please register online at www.ahp.org

OR complete the registration form and return it to AHP

By mail to:
 AHP International Conference
 313 Park Avenue
 Suite 400
 Falls Church, VA 22046

By fax to:
 703-532-7170
 with credit card information