

MARCH 26-28, 2019  
JW MARRIOTT ATLANTA BUCKHEAD  
ATLANTA, GA

# Leading Forward 2019

THE AHP EXECUTIVE SUMMIT

## REGISTRATION

### REGISTER TODAY!

[www.ahp.org/LeadingForward](http://www.ahp.org/LeadingForward)

**Application must be filled out in its entirety to be accepted.**

Mail: Association for Healthcare Philanthropy  
2511 Jefferson Davis Hwy, Suite 810  
Arlington, VA 22202

Fax: 703-532-7170

E-mail: [meetings@ahp.org](mailto:meetings@ahp.org)

### PARTICIPANT INFORMATION

- ☐ I am the chief development executive at my organization.

Name \_\_\_\_\_ Designation \_\_\_\_\_

Name on badge \_\_\_\_\_

Title \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone \_\_\_\_\_

Mobile Phone \_\_\_\_\_

Fax \_\_\_\_\_

Email\* \_\_\_\_\_

*\*Email addresses required for registration, but not published or distributed.*

**Do you plan to attend the opening session/dinner on March 26?**

☐ Yes ☐ No

**Do you plan to attend the Grady Health site visit, a bonus add-on event, on the morning of March 28?**

☐ Yes ☐ No

**Which cohort working group would you like to participate in during the afternoon session on March 27? (select one)**

- ☐ Health Systems: System-level leadership  
☐ Health Systems: Hospital-level leadership  
☐ Community Hospital leadership  
☐ Children's Hospital leadership  
☐ Academic Medical Center leadership  
☐ Hospice/Long-Term Care leadership  
☐ Other \_\_\_\_\_

### Registration Notes

Please check here if:

- ☐ You require special assistance or have special dietary needs. Please email information to [meetings@ahp.org](mailto:meetings@ahp.org).

*If you have any dietary restrictions, please list them below:*

- ☐ You are a first-time attendee of the Leading Forward executive summit or a new member of AHP.

### How did you hear about this event?

- ☐ Mail ☐ Email ☐ Colleague ☐ Website  
☐ Social networking site  
☐ Other/Source Code \_\_\_\_\_

☐ I would like information about AHP member benefits.

### HOTEL INFORMATION

JW Marriott Atlanta Buckhead  
3300 Lenox Rd NE  
Atlanta, GA 30326  
404-262-3344

Learn more and reserve your room at  
[www.ahp.org/LeadingForward](http://www.ahp.org/LeadingForward)

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## REGISTRATION INFORMATION

	<b>Early Registration</b> postmarked by 12/12/18	<b>Advanced Registration</b> postmarked by 1/25/19	<b>Regular Registration</b> postmarked by 3/8/19
<b>Full Conference Registration</b>			
<b>Tuesday, March 26–Thursday, March 28</b>			
AHP member	<input type="checkbox"/> \$795	\$895	\$995
Non-member	<input type="checkbox"/> \$995	<input type="checkbox"/> \$1,095	\$1,195

## PAYMENT METHOD

- ☐ My check is attached, made payable to the Association for Healthcare Philanthropy. **(All checks should be made out to AHP in US dollars).**
- ☐ Please charge my: ☐ VISA ☐ MASTERCARD ☐ AMEX  
**(All credit cards are processed in the US and will be processed in US dollars). Fax to 703.532.7170**

Total amount due: \$

Name (as it appears on card)

Card number

Expiration date

CVC security code

Signature

**HAVE QUESTIONS? EMAIL AHP'S MEETINGS  
DEPARTMENT WITH ALL INQUIRIES AT  
MEETINGS@AHP.ORG**

### Registration Policies\*

Thank you for your interest in attending the 2019 AHP Leading Forward Conference. More information about AHP's registration policies can be found online. If you have any questions about the registration process or options, please contact AHP at **703-532-6243** or via email at [meetings@ahp.org](mailto:meetings@ahp.org). The most up-to-date conference information is online at [ahp.org/LeadingForward](http://ahp.org/LeadingForward).

### Photography Release

I grant to AHP, its representatives and employees the right to take photographs and/or videos of me and my property to copyright, use and publish in print and/or electronically. I agree that AHP may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, email, social media, web content. By registering, I have read and understood the above.

\* To see a full explanation of AHP's registration policies, visit [ahp.org/terms](http://ahp.org/terms)

Registration forms will not be processed without payment. All credit card payments will be processed in US funds. All cancellation requests must be submitted to [meetings@ahp.org](mailto:meetings@ahp.org) by February 15, 2019. If registration is canceled in writing by **February 15, 2019**, the registration fee less a \$125 cancellation fee will be processed. After February 15, 2019, no refunds will be made.

For your convenience, payment for conference registration or sponsorship payments may be made to AHP by mail, phone, fax, or through AHP's website. Please note that AHP cannot control the handling of payment information sent to AHP by way of mail or email. AHP will not be responsible for any damages or loss incurred by you if you choose to send payment information (including, without limitation, credit card information) to AHP by way of mail or email. You therefore accept sole responsibility for any damage or loss resulting from your use of such communication methods. Please review our Privacy Policy found at [ahp.org/privacy](http://ahp.org/privacy) for a summary of our practices related to the collection and use of personal information.