



## REGISTRATION FORM

### Attendee Information

Name:	License Type & Number:
Mailing Address:	City/State/Zip:
Email:	Phone Number:

### Early Registration - before Oct 1st

Ticket Type	Professional Fees (CEUs)	Student Fees
Entire Conference	<input type="checkbox"/> \$250	<input type="checkbox"/> \$150
Thursday/Opening Day (0 CEUs)	<input type="checkbox"/> \$25	<input type="checkbox"/> \$25
Friday (7.5 CEUs possible)	<input type="checkbox"/> \$125	<input type="checkbox"/> \$75
Saturday (6.5 CEUs possible)	<input type="checkbox"/> \$125	<input type="checkbox"/> \$75
Friday & Saturday (14.0 CEUs possible)	<input type="checkbox"/> \$225	<input type="checkbox"/> \$125



### Regular Registration - after Oct 1st

Ticket Type	Professional Fees (CEUs)	Student Fees
Entire Conference	<input type="checkbox"/> \$325	<input type="checkbox"/> \$225
Thursday/Opening Day (0 CEUs)	<input type="checkbox"/> \$50	<input type="checkbox"/> \$50
Friday (7.5 CEUs possible)	<input type="checkbox"/> \$150	<input type="checkbox"/> \$100
Saturday (6.5 CEUs possible)	<input type="checkbox"/> \$150	<input type="checkbox"/> \$100
Friday & Saturday (14.0 CEUs possible)	<input type="checkbox"/> \$275	<input type="checkbox"/> \$175

### Payment Information

<b>Payment Method:</b>	
<input type="checkbox"/> Check (payable to Pacific Institute)	
<input type="checkbox"/> Credit Card (select one): <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard	
Credit Card Number:	Exp. Date:
Cardholder's Name:	Signature:

**Please mail form to:**  
 EHI c/o Pacific Institute  
 432 Ivy Street  
 San Francisco, CA 94102

**Or fax to:**  
 415-651-8671