

Academic Fast Track

Certificate Nursing Education/ Certificate Health Professions Education August 3 - 4, 2020 & Immersion in Simulation August 5 - 6, 2020

**Drexel University, Health Sciences Campus
Three Parkway, 1601 Cherry St.
10th Floor, Room 1043
Philadelphia, PA 19102**

To register, complete this form and mail with payment to Drexel University. One form per person; you may photo copy this form. If you need special accommodations, due to a disability, call us at (800)666-7737. We will attempt to meet needs presented at the last minute, but 2 weeks notice will be appreciated.

Although rarely necessary, we reserve the right to substitute faculty. Faculty are well qualified to speak in their area of expertise. The views expressed by them are not necessarily those of Drexel University.

Drexel University reserves the right to photograph, videotape or record Conference participants and to publish their likenesses in University publications, video or other academic, educational or promotional materials.

FULL PAYMENT IS REQUIRED PRIOR TO THE START OF THE CONFERENCE

First Name	M.I.	Last Name
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List Credentials	Title	
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Home/Street Address (Street Address Required - No P.O. Box Address)		
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City/State/Zip		
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Home Phone	Work Phone	E-mail address (Required)
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Employer's Name		
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Employer's Street Address		
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☒ **- How did you hear about this Conference?**

- ☐ Email Message ☐ Flyer Announcement
☐ Web Search
☐ Colleague ☐ Other _____

- | | |
|--|-----------------|
| <input type="checkbox"/> Certificate in Nursing Education/Cert Health Professions Education: August 3-4, 2020 | |
| <input type="checkbox"/> Live <input type="checkbox"/> Webcast | \$695.00 |
| <input type="checkbox"/> Immersion in Simulation: August 5-6, 2020 (not available via webcast) | \$495.00 |
| <input type="checkbox"/> Attend Both Programs and save! August 3-6, 2020 | \$892.50 |

PAYMENT:

Check made payable to Drexel University, CNHP

Total Registration fee: \$ _____

EASY WAYS TO REGISTER:



REGISTER ONLINE - visit us at:
www.drexel.edu/cnhp/ce



U.S. MAIL
Registration form with payment
(Check or Money Order)
(no credit cards by mail)

Drexel University
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and Health Professions,
Continuing Nursing Education
Three Parkway,
1601 Cherry St, MS 101002
10th Floor, Room 1058
Philadelphia, PA 19102

FEDEX/UPS
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College of Nursing
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Continuing Nursing Education
Three Parkway,
1601 Cherry St.
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Philadelphia, PA 19102
Attn: Wayne Miller



For registra-
tion,
1-800-666-7737

tion infor-
mation,
please call

Cancellation Policy:

A \$25 administrative fee will be charged for all refunds. Telephone requests will be honored up to four business days before the start of the conference and must be confirmed in writing. If you need to cancel your registration, please email Elizabeth Diaz at ed35@drexel.edu with your request or call 1800-666-7737. If cancellation occurs within three business days prior to the start of the conference, a refund will not be available. However, the full amount of tuition may be applied to a future Drexel University Conference (Note: certain restrictions apply). Allow minimum of six weeks from date of conference completion for processing refunds. Please Note: A \$50.00 administrative fee will be charged for any returned checks due to insufficient funds.

*Webcast cancellations are subject to additional fees based on materials shipped at time of cancellation.

OFFICE USE ONLY:

Date Rec'd _____

Amt. Rec'd _____

Fee Not Rec'd _____

Form of Payment: _____

PC/MO/HC

Revised 11/19