

REGISTRATION FORM

Advanced Methods for Improving Relational Coordination: A Toolkit for Leaders and Facilitators

Date to be Announced

Name: _____ Organization: _____
Title: _____ Address: _____
Phone: _____
Email: _____

Standard Registration: The standard registration fee is \$2,250.

RCC Partner Discount: A fee discounted by 10% (\$2,025) is available for current partners of the Relational Coordination Collaborative.

Graduate Student Discount: A fee discounted by 33% (\$1,507) is available for full-time graduate students.

Multiple Participant Discount: We offer a discount for 2 or more people from the same organization registering for this workshop; please contact us for details.

Please indicate your preferred method of payment.

Credit Card (Invoice will come via PayPal)

Check (mail a check for the appropriate amount, payable to Relationship Centered Health Care, to the address below)

Please submit your completed registration form by means of scanning and email (asuchman@rchcweb.com), fax (206.350.7113) or mail it to:

Relationship Centered Health Care, LLC
ATTN: Anthony Suchman, MD
277 Goodman Street North, Suite 311
Rochester, NY 14607

We will process workshop applications in the order in which they are received. If you need to cancel after you register we cannot offer refunds, but you can transfer your fee to another course or to another person.

Thank you and we look forward to seeing you at the next workshop!