



## Instructor's Update

Saturday, May 1, 2010

4:30pm – 8:30pm

**YES**, I plan on attending the Instructor's Update and have enclosed my \$20 payment, which will include dinner and 3 Continuing Education Points.\* I understand that this offering occurs one day prior to the start of the IAHCSMM Annual Meeting, and have made the appropriate airline/hotel reservations.

*\*Note: Instructor's must be registered for the full conference prior to acceptance of Instructor Update invitation, and be an Approved Instructor in good standing.*

Name: \_\_\_\_\_ ID# \_\_\_\_\_  
First Last IAHCSMM ID Number

Payment:  Check Enclosed  Visa  Mastercard  American Discover

Credit Card: \_\_\_\_\_  
Credit Card Number Expiration Date CVV2 Security Number  
 Visa/Mastercard (3 digits on back)  
 American Express (4 digits on front)

Signature: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Card Holder's Signature Billing Zip Code of Card Holder

Return Completed form **(NO LATER THAN March 31, 2010)** to:

**IAHCSMM**  
 213 West Institute Place • Suite 307  
 Chicago, IL 60610  
 Phone: 800-962-8274 • Fax: 312-440-9474  
 Scan and Email to: jeff@iahcsmm.org