

— ORDER FORM —

**2011 NARHC Fall Institute
Flash Drive or PowerPoint Pass Code**

A Flash Drive purchase contains the agenda, presentations, participant's list and exhibitor/sponsorship information from this conference. The Flash Drive will be mailed out once payment is received. You may elect instead to be given the Pass Code to access PowerPoints immediately on the NARHC website www.narhc.org at the events tab. Contact NARHC at 866-306-1961 if you have any questions.

Order Form

Name: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Who	Cost	Quantity	Shipping & handling	Total
Fall Institute Conference Attendees	\$25.00		\$2.99 per flash drive	
NARHC Member: Non-Attendee	\$100.00		\$2.99 per flash drive	
Non NARHC Member: Non-Attendee	\$250.00		\$2.99 per flash drive	
Pass Code Only (same cost minus shipping/handling)				
Total:				\$

Payment Method: Please make checks or money orders payable to:
National Association of Rural Health Clinics

Credit Card: **Visa or MasterCard Only!**

Credit Card Number: _____

Expiration Date: _____ **Three digit security code:** _____

Name on Card: _____

Billing Address on Card: _____

Amount: _____ **Signature:** _____

Please complete and return this form and submit order by:
Email: rdavis@hsagroup.net
Fax: 866-311-9606
Mail: 2 East Main Street, Fremont, MI, 49412

THANK YOU!