



National Association of Rural Health Clinics  
**NARHC 2023 Spring Institute Registration**

Hyatt Regency San Antonio Riverwalk – Mar 20-22, 2023

123 Losoya Street San Antonio, TX 78205

Please verify your 2023 NARHC member status prior to registering  
 Refunds will NOT be provided if membership is paid after registration.

Member     Non-Member

RHC/Organization Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

	On-Time Registration <u>Ends Feb. 28</u>	Late Registration <u>March 1-18*</u>	Qty	Fee
<b>NARHC Member</b>	<input type="checkbox"/> \$575	<input type="checkbox"/> \$625	_____	_____
<b>Non-Member</b>	<input type="checkbox"/> \$675	<input type="checkbox"/> \$725	_____	_____
		<b>Total</b>	_____	_____

Payment Method     Check     Credit Card

Name on Card: \_\_\_\_\_

Card #: \_\_\_\_\_ Exp Date: \_\_\_\_\_ CVV: \_\_\_\_\_

Card Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

*Contact us if you do not receive a confirmation email.*

**Mail:** NARHC, 2 E. Main St., Fremont, MI 49412    **Phone:** 866-306-1961    **Email:** [asst@narhc.org](mailto:asst@narhc.org)

**CANCELLATION POLICY:** To submit a cancellation request, visit the Cancellation tab on our events page. All cancellation refunds will incur a \$25 processing fee. Transfers to a future conference are not allowed.

**100%** - On or before February 17, 2023

**50%** - February 18, 2023, thru March 5, 2023

**No Refunds** – After March 5, 2023

**Substitute Attendee** – Substitutions will be allowed with advance notice



**HOTEL ROOM RESERVATIONS:**

NARHC has a room block at the Hyatt Regency San Antonio Riverwalk. The hotel block will be **closing February 27, 2023**. Room rates begin at **\$203/night** for a single occupancy. This is a busy time of year for this hotel, book your room before the block closes or fills up! Reserve your room at: <https://www.hyatt.com/en-US/group-booking/SATRS/G-RHCA>. *Rates & any concessions NARHC attendees receive are NOT guaranteed through 3<sup>rd</sup> party online booking services.*

## Registrant Details

Please copy this page & fill this page out for EACH registrant

First Time Attendee *Please let us know in advance if you require wheelchair access.*

Food Allergies/Restrictions: \_\_\_\_\_  Vegetarian

How did you hear about our conference? \_\_\_\_\_

Gender:  Female  Male  Prefer not to answer

Age:  up to 30  31-35  36-40  41-45  46-50  51-55  56-60  61+

Job Category (Please select ALL that apply):

- Billing & Coding
- Clinic Manager/Administration
- Clinic Owner
- Compliance/Quality
- Consultant
- Hospital/Health System Administration (CEO, CFO, COO, Director, etc.)
- Medical Staff (RN, MA, CNA, etc.)
- Office Staff (Office Manager, Admin Assistant, Office Secretary, etc.)
- Provider
- Social Worker
- Other \_\_\_\_\_

### Attendee Badge/APP Information

*Information used in our Event App is visible to those who register for either conference.  
Emails will not be displayed; however, you will have the ability to email from within the app.*

Preferred Name \_\_\_\_\_

Job Title \_\_\_\_\_

Credentials \_\_\_\_\_

Name of RHC/Organization \_\_\_\_\_

RHC/Org's City & State \_\_\_\_\_

Email (**Attendees must provide their UNIQUE email**) \_\_\_\_\_

Cell Phone # (will not be displayed) \_\_\_\_\_

*Registrants of the conference will receive an email from our NEW event app Pheedloop with your login information prior to the start of the conference. For those who have not used our app previously, this is a vital piece that will enhance your experience at our conference. It will also allow you to have the chance to be entered into the prize drawings happening on day 2 of the conference! It is important that you allow notifications from the app.*

*NARHC reserves the right to use any photographs/video taken during the conference for promotional purposes.  
By submitting this form, you agree to be photographed and understand the cancellation policy.*