Registration Form

BY PHONE: +1-855-255-0755

BY EMAIL: support@hospcompliance.com

Conference Title:_____

No of User & Registration Options: _____

☐ Live ☐ Recording
☐ Transcript ☐ Digital Download

Billing Address

Name_____

Company_____

Address _____

_____

City, State, Zip_____

Email Address** _____

** *Required to RECEIVE a copy of your INVOICE/RECEIPT.*

Telephone _____

(We will only call you if we have questions about your order.)

Shipping Address *(If different from billing address)*

Name_____

Company_____

Address _____

_____

City, State, Zip _____

Email Address** _____

** *Required for electronic products.*

Your satisfaction is guaranteed.

If for any reason you're not 100% satisfied with your purchase, call us at 1-855-255-0755, to arrange a refund (if applicable).

Payment

Purchase Order# _____

Please charge my: ☐**Visa** ☐**Amex** ☐**Other**

Name on card: _____

Account #: |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

Exp. Date: |_|_|_|_|

CVV: |_|_|_|_|

|_|_|_|_|

Shipping and Handling Charges

No shipping charges on Live or Recorded Webinars.

Shipping costs are subject to change.

Zip:

Signature:_____ .