

1. Contact Information

All advance registrations must be received by end of day on February 16, 2018. After this date, registrations can ONLY be made on-site with payment.

First Name		Last Name	
Title/Position		Organization	
Address			
City	State	Zip	Country
Telephone		Fax	
Email		Nickname for Badge	

2. Survey & Information

I have been a member of HL7 for: ☐ 0-4 years ☐ 5-9 years ☐ 10-14 years
☐ 15-19 years ☐ 20+ years ☐ I am not a member of HL7

Meal Requirements: ☐ Diabetic ☐ Regular ☐ Vegetarian ☐ Other: _____

3. HL7 Genomics Policy Conference Fees

I plan to attend the **HL7 Genomics Policy Conference** event (Wednesday & Thursday).

I am a/an:

- ☐ Exhibitor, Hill Staff, Press, Speaker, Sponsor
☐ HL7 Member, eHI Member, Government Employee, Student
☐ Non-Member

HL7 Genomics Conference Fee

Free
\$300 per person
\$500 per person

4. Payment Information

Payment must be included in order to process your registration. Method of Payment (US Dollars, Drawn on US Bank Only)

☐ Check (Please make payable to: Health Level Seven International) Credit Card: ☐ Visa ☐ Master Card ☐ American Express ☐ Discover

Number	Expiration Date	Billing Zip Code
Name on Card (Please Print):		Signature

Cancellation/Refund Policy: Prepaid registrants who cancel prior to February 12, 2018 will receive a full refund less a \$50 processing fee. After this date, no refunds will be given for ANY reason.

Payment Policy: Registrations for the meeting can only be paid for in US currency.

Mail/Overnight

Health Level Seven International
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Fax

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