



4 Ways to Register:

- Register and pay online at: www.zeffert.com
Fax this completed form to: (314) 336-4841
Email this form to: Training@zeffert.com
Mail this form and payment to: Zeffert & Associates
12101 Woodcrest Executive Dr
Suite 180
St. Louis, MO 63141

Questions? Call the Training Department at 1-866-760-6000

Table with 3 columns: Training choice, Ahead of the Class rate, Regular Rate. Rows include: The complete 2-day training & HCCP exam-3rd day, The complete 2-day training (no exam), The HCCP Exam and review (3rd day). Includes a note about the special Ahead of the Class rate.

3 Location city:

4 Attendee 1 \*Email
Attendee 2 \*Email
Attendee 3 \*Email
Attendee 4 \*Email

\*A valid email address is required to ensure timely receipt of important event information, including test results

5 How did you hear about this training? [ ] phone [ ] email [ ] word of mouth [ ] fax [ ] Zeffert training [ ] other (please explain):

6 Please charge \$ to: [ ] VISA [ ] MasterCard [ ] American Express [ ] Invoice me
Card # Exp. Date Sec Code#
Cardholder or Invoice name:
Billing Address:
City: State: Zip:
Phone: Fax:
Email:
Organization/Site Name: Phone:

Refund Policy: Full Refund - At least 2 months prior to the session Full Refund (less a \$50 administration fee) - at least 1 month prior to session No Refund - Less than 1 month before session. Substitute personnel or credits toward future PUBLIC Zeffert & Associates trainings are allowed for up to 1 year.

7 Signature of authorized payer (student or supervisor who approves training expenditures)

I have read and agree to be bound by the terms and conditions set forth on this registration form. In addition, I am authorized by the organization listed above to incur these charges on its behalf.

Signature Date