REGISTRATION FORM

Asthma Educator Certification Preparation Course

September 23 - 24, 2006 • St. Louis, MO

Pre-Registration is Required. Deadline: September 11, 2006

One person per form. Full payment must be included with registration. No invoices will be issued.

First/Last Name for Badge _____

AARC Member # _____

First/Last Name for Completion Certificate _____

Credentials for Completion Certificate _____

Employer _____

Preferred Mailing Address (indicate if this is your ☐ Home or ☐ Business)

_____

_____

City _____ State _____ Zip Code _____

Daytime Phone (include area code) _____

E-mail Address _____

Course Fees

Pre-registration is required. Deadline: September 11, 2006.

By September 5: ☐ AARC Member $210 ☐ Nonmember $305*

September 6-11: ☐ AARC Member $225 ☐ Nonmember $325*

Cancellations must be in writing. There will be a 30% handling fee for cancellations received by September 11. No refunds will be made thereafter.

*You may become a member prior to registering by going to **www.AARC.org**. If you opt to pay the nonmember fee you are entitled to free, automatic AARC membership. Check here ☐ if you **DO NOT** wish to receive this complimentary 12-month AARC membership.

☐ Check or Money Order enclosed. Charge my: ☐ MasterCard ☐ VISA ☐ American Express

Name of Card Holder (print) _____

☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐-☐☐ _____

Credit Card # Expiration Date Signature

If paying by credit card, you may FAX your Registration Form to (972) 484-2720.
Mail Registration Form and check, payable to AARC, to:
AARC, 9425 N. MacArthur Blvd., Suite 100, Irving, TX 75063-4706 • Phone (972) 243-2272