

2017 Annual Meeting & Conference Registration Form

Please fill out and return a hard copy of this form **only if you are paying by check**. Please register only one person per form. This form may be duplicated or you may obtain additional forms at www.sswlhc.org. Faxed registrations are not accepted. Online registration with a credit card is strongly encouraged. **A \$5.00 check processing fee will apply to all check payments. Registrations will not be processed without payment.**

FIRST NAME / LAST NAME _____

TITLE _____

INSTITUTIONAL AFFILIATION _____

ADDRESS _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

EMAIL _____

GUEST NAME BADGE (WELCOME RECEPTION) _____

- Vegetarian Meal Requested**
- First Time Attendee**
(Please check here if this is your first SSWLHC Annual Conference.)
- Special Assistance Required**
(A SSWLHC staff member will contact you.)

Contact Information

Toll Free Phone: (866) 237-9542 Email: info@sswlhc.org

Return this form with a check to:
SSWLHC, 100 North 20th Street, Suite 400
Philadelphia, PA 19103-1443

Registration Fee Schedule - All Fees Payable in U.S. Dollars

CATEGORY	POSTMARKED BY	POSTMARKED
	SEPTEMBER 13, 2017	AFTER SEPTEMBER 13, 2017
Member	<input type="checkbox"/> \$580	<input type="checkbox"/> \$700
Non-Member <small>Includes SSWLHC Membership through June 30, 2018</small>	<input type="checkbox"/> \$690	<input type="checkbox"/> \$820
Unemployed/Retired	<input type="checkbox"/> \$325	<input type="checkbox"/> \$375
Student Rate* <small>(Full-time students only)</small>	<input type="checkbox"/> \$325	<input type="checkbox"/> \$375
<small>*Student discounts are available. Please call SSWLHC headquarters for details.</small>		
One Day Only (Thurs or Fri)	<input type="checkbox"/> \$255	<input type="checkbox"/> \$270
One Day Only (Saturday)	<input type="checkbox"/> \$135	<input type="checkbox"/> \$150

Registration Fee \$ _____

Optional Pre-Conference Intensives

Wednesday, October 11, 2017

(Register for an intensive only or add one to your conference registration.)

- I-1: Leadership Institute (Tues & Wed 10/10-10/11, \$195)
- I-2: Pediatric Health Care Social Work Intensive (\$155)
- I-3: Leaning into Leadership in Case Management (\$85)

Pre-conference Intensive \$ _____

Join and Register! Become a SSWLHC member today and register for the 2017 Meeting & Conference at the member price. Complete an online member application at <http://sswlhc.org/join/become-a-member/> to take advantage of the member discount.

Foundation Reception at \$45 each \$ _____
(tax deductible donation)

Guest (Included in your fee. Additional attendees only.)

Welcome Reception at \$40 each \$ _____

Membership Renewal (Expiration 6/30/18)

Management at \$149 each

Direct Patient Care at \$99 each

Faculty at \$94

Transitional/Unemployed/Retired Emeritus at \$79

Student at \$59

Associate at \$174 each

Subtotal \$ _____

Check processing fee + \$5.00

Total Amount Due \$ _____

Payment Information

Check or Money Order Enclosed
(All checks must be made payable to SSWLHC and in U.S. Dollars)

Tax ID # 23-3100897 DUNS# 962585829

Check Number: _____ Amount of Check: \$ _____