

2018 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.)

Join and Register! Become a SSWLHC member today and register for the 2018 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.

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 SEPTEMBER 5, 2018	POSTMARKED AFTER SEPTEMBER 5, 2018
Member	<input type="checkbox"/> \$585	<input type="checkbox"/> \$705
Non-Member <small>Includes SSWLHC Membership through June 30, 2018</small>	<input type="checkbox"/> \$695	<input type="checkbox"/> \$825
Unemployed/Retired	<input type="checkbox"/> \$330	<input type="checkbox"/> \$380
Student Rate* <small>(Full-time students only)</small>	<input type="checkbox"/> \$330	<input type="checkbox"/> \$380
<small>*Student discounts are available. Please call SSWLHC headquarters for details. **Students must submit a copy of their student ID with payment.</small>		
One Day Only (Thurs or Fri)	<input type="checkbox"/> \$260	<input type="checkbox"/> \$275
One Day Only (Saturday)	<input type="checkbox"/> \$140	<input type="checkbox"/> \$155

Registration Fee \$ _____

Optional Pre-Conference Intensives Wednesday, October 3, 2018

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

- I-1: Leadership Institute (Tues & Wed 10/2-10/3, \$195 by 9/5, \$225 after 9/5)
- I-2: Pediatric Health Care Social Work Intensive (\$155 by 9/5/18, \$175 after 9/5)
- I-3: Epic Half-Day Intensive (\$85 by 9/5/18, \$99 after 9/5)
- I-4: Hospice & Palliative Care Half-Day Intensive (\$85 by 9/5, \$99 after 9/5)

Pre-conference Intensive \$ _____

Optional Day of Service Opportunities Wednesday, October 3, 2018

- Volunteer with "Store-to-Door": (limited to 8 people) – No fee – Description of Activity: We will be grocery shopping for seniors who are homebound. Meet in the hotel lobby at 8:00 a.m. More info about the organization can be found here: <https://www.storetodooroforegon.org/volunteer/>

Foundation Reception at \$60 each \$ _____
(tax deductible donation)

Guest (Included in your fee. Additional attendees only.)
 Welcome Dinner at \$120 each \$ _____

- Membership Renewal (Expiration 6/30/19)**
- 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: \$ _____