

# MAIL-IN CONFERENCE REGISTRATION FORM

## INSTRUCTIONS:

### Complete the Application below by:

- (1) entering the requested information in the empty text boxes,
- (2) entering the Amount to be Paid in the text box you / your organization is paying for the Sponsorship and
- (3) inserting the Sponsor Fee Level related to the amount to be paid.

Make your payment to "UPHA CHW Section" and attach the payment to the completed Application and mail these two documents to:

UPHA / CHWC Event  
c/o Utah Public Health Association  
PO Box 9387  
Millcreek UT 84109

## 2019 CHWs ELEVATED: The Rise of Utah Community Health Workers!

May 22, 2019 8:30 am - 3:30 pm ~ Viridian Conference Center ~ 8030 South 1825 West ~ West Jordan

Conference Registration

PRINT CONFIRMATION

### REQUIRED INFORMATION IN RED

\*First Name:

\*Last Name:

\*Phone:

\*eMail Address:

Organization: