

**UAHVO Conference Registration Form**  
**Courtyard by Marriott Hotel • St George, Utah**  
**September 12, 13, and 14, 2023**

ALL REGISTRATION FORMS MUST BE RECEIVED NO LATER THAN July 15, 2023

Hospital \_\_\_\_\_ City \_\_\_\_\_

| List Names of Registrants (PLEASE TYPE OR PRINT CLEARLY) |            |           |
|--|------------|-----------|
|  | First Name | Last Name |
| 1  |            |           |
| 2  |            |           |
| 3  |            |           |
| 4  |            |           |
| 5  |            |           |
| 6  |            |           |
| 7  |            |           |
| 8  |            |           |
| 9  |            |           |
| 10   |            |           |
| 11   |            |           |
| 12   |            |           |
| 13   |            |           |
| 14   |            |           |
| 15   |            |           |

*(Use back for more registrants, if necessary.)*

**TOTALS**

|   |    |  |
|---|----|--|
| Total # registrants:                            |    |  |
| Registration fee:                               | \$ | List either \$100.00 for UAHVO members or <b>\$120.00</b> for non-members. |
| <b>Add LATE FEE, if mailed after Aug. 15th:</b> | \$ | <i>Late Fee: \$10 per member or \$50, whichever is LESS.</i>               |
| <b>TOTAL REGISTRATION FEES DUE:</b>             | \$ | Number of registrants x registration fee (Checks payable to UAHVO)         |

Contact Krista Yearsley if paying by credit card: 435-851-3427. Credit card fees will apply.

Registration fee is required for all persons whether attending one or all days.

**NO REFUNDS AFTER AUGUST 15, 2023**

|                                 |   |
|---------------------------------|---|
| Information submitted by: _____ | Please complete and make check payable to UAHVO.<br>Mail to Amanda Hoopes, UAHVO Treasurer<br>225 North Valley Dr, Unit 83<br>ST George, Utah 84770 |
| Telephone: _____                |   |