

FHCA 2020 VIRTUAL CONFERENCE

AUGUST 18–20, 2020

INSTRUCTIONS AND REGISTRATION FORMS

Use a separate Attendee Registration Form for each Registrant.

2 EASY WAYS TO REGISTER

INTERNET: www.fhcaconference.org

Register online and receive immediate acknowledgement.

MAIL: FHCA / P.O. Box 1459 / Tallahassee, FL 32302

Please read these Registration Policies carefully before you register. Register for the FHCA 2020 Virtual Conference by going online or filling out the registration form. Fees are discounted if the registration is received by Thursday, July 30.

Please follow these guidelines to fill out the form:

- Use a separate Attendee Registration Form for each registrant. If you are paying for multiple registrants, please mail all registration forms together, with the payment information on one form only.
- **Voting Delegate:** Each FHCA member nursing home and member assisted living facility should designate a single voting delegate. Place a check mark in the voting delegate box only if the registrant on the form is the voting delegate. If your facility is part of a multifacility group, a regional or home office representative may act as your facility's voting delegate. Following is the FHCA bylaws provision which applies to its members' voting privileges:

Article VII. Voting Privileges

Section 1. Each facility member shall have one vote on any question coming before the Annual Conference, a special meeting or in any of the affairs of this Association.

Section 2. The voting delegate of a facility member shall be the administrator, owner, an officer or management employee of the licensee. A person employed in the day-to-day operation of that facility may be the voting delegate if so designated in writing by the administrator, owner or an officer of the licensee.

Call Dawn Segler (800–771–3422) to request a Voting Delegate Authorization Form on which to designate your voting delegate. It is not necessary to request a Voting Delegate Authorization Form if the administrator is serving as the voting delegate.

REGISTRATION POLICIES

Registration Deadline: Registrations made after July 30 will be assessed an additional \$50 fee. Attendees registered by the July 30 deadline will be guaranteed a welcome gift and attendee packet by mail. Registration confirmations will be emailed to each attendee. Please note this may take up to 7 days.

Cancellations: Cancellation and refund requests for registrations must be submitted in writing to swood@fhca.org by July 30, 2020 to be eligible for a refund and are subject to a \$50 cancellation fee. Requests received after July 30 will not be accepted unless cancellation is due to survey at your facility or emergency due to COVID–19. Cancellations due to a facility survey will still need to be submitted in writing to swood@fhca.org as soon as possible and FHCA will refund your registration with exception of a \$50 administrative fee. Please allow up to six (6) weeks, from the date of request, for all refunds to be issued.

Additional Event Policies: By registering for the FHCA Virtual Conference you are also agreeing to additional event policies located at www.fhcaconference.org. Should you have questions regarding any policy, please contact lbradley@fhca.org.



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Use a separate Attendee Registration Form for each Registrant.

STEP 1: REGISTRANT INFORMATION

Print the registrant's information below.

Name _____
License No. _____ Title _____
E-mail _____
Facility/Organization _____
Address _____
City _____ State _____ Zip _____
Phone _____

STEP 2: VOTING DELEGATE

Be sure to check the appropriate box if registrant is the voting delegate (please see voting delegate guidelines on page 1).

YES NO

STEP 3: REGISTRATION TYPE

Select what you would like to register for. Please use a separate Registration Form for each Registrant.

1ST REGISTRANT

(Includes 33 virtual Education Sessions including the Online Medical Errors Course, Preceptor Refresher Course and Administrator Human Trafficking Course with the potential to earn 35 continuing education hours; On-demand sessions available through September 4)

	By July 30	After July 30	
• FHCA Member	\$500	\$550	\$ _____
• Nonmember	\$690	\$740	\$ _____

ADDITIONAL REGISTRANT *(from same facility campus)*

(Includes 33 virtual Education Sessions including the Online Medical Errors Course, Preceptor Refresher Course and Administrator Human Trafficking Course with the potential to earn 35 continuing education hours; On-demand sessions available through September 4)

	By July 30	After July 30	
• FHCA Member	\$450	\$500	\$ _____
• Nonmember	\$640	\$690	\$ _____

STEP 4: PAYMENT INSTRUCTIONS

If you are paying for multiple registrants, you may mail all registration forms together with the following payment information provided on one form only. Your total payment amount should be the sum of all the individual forms.

CHECK PAYABLE TO: FHCA, P.O. Box 1459, Tallahassee, FL 32302 or **CHARGE MY:** AMEX Mastercard VISA Discover

Card No. _____

Name _____ Exp. _____

Email for Receipt _____

Signature _____ TOTAL \$ _____