

## Registration Form

Eleventh Annual Taos Writing Retreat for Health Professionals • August 1-7, 2010

NAME: \_\_\_\_\_ INSTITUTION: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ EMAIL: \_\_\_\_\_

DAYTIME PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ KAISER PERMANENTE EMPLOYEE?  Yes  No

How did you hear about the retreat?  CME PUBLICATION  THE PERMANENTE JOURNAL  WEBSITE  FRIEND  Other \_\_\_\_\_

REGISTRATION FEES: Registration (*On or before 6/18/10*)  Non-refundable deposit . . . . . \$750.00  
(includes lodging, meals, and all supplies)  Individual . . . . . \$2,250.00  Late registration (*After 6/18/10*) . . . . . \$2,350.00  
 Spouse/companion . . . \$35/night for \_\_\_\_ nights

METHOD OF PAYMENT:  CHECK (payable to UNM Office of CME)  UNM TUITION REMISSION FORM (\$860 toward tuition)  INSTITUTIONAL PURCHASE ORDER  
 Visa /  Mastercard Account Number: \_\_\_\_\_ "V" Code (last 3 numbers on back of Card) \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Cardholder's Signature: \_\_\_\_\_

Make check payable to the UNM Office of CME. Please mail to: **The University of New Mexico, Office of CME**, MSC09 5370, 1 University of New Mexico, Albuquerque, New Mexico, 87131-0001. Telephone registrations (505) 272-3942 and Fax (505) 272-8604 registrations will be accepted for Visa, MasterCard and Purchase Orders only. Registrations faxed without a Visa or MasterCard number or a copy of the Institutional Purchase Order will not be processed.