

FAX COMPLETED FORM TO: 913-712-9247 (No cover sheet required)

Disney's Approach to Quality Service for Healthcare Professionals (One-day)

Pittsburgh, PA May 11, 2010

Center for Executive Education

Guest Registration Information

Primary Contact Name: _____ Today's Date: _____

Attending the event as a guest Additional guests are listed on the second page of this form.

Title: _____ Organization: _____

Address: _____ City/State/Zip: _____

Email: _____ Phone: _____ Fax: _____

Promotional Code: _____ Promotional Code Discount Per Guest: _____

How I heard about the event: Newspaper Radio TV Magazine Disney Institute Website
 Internet Search/Banner Ad Email/Mail Referral

Payment Method (Please check and/or provide all applicable information. All Purchase Order and Check payments must be received within three (3) weeks of registration and prior to the event. Registrations are not final until receipt of payment in full.)

Check Please make checks payable to "Solution Infusion, LLC" and mail with the registration form to this address:
 Solution Infusion c/o McKonly & Asbury 415 Fallowfield Road Camp Hill, PA 17011

Purchase Order (P.O.) (PO Number: _____)

Card Type:	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa	<input type="checkbox"/> AMEX	Card Number:			
Cardholder Name:				Expiration Date:		CID/S.C.:	
Billing Address:							
City, State, Zip:							

Program Fee Calculator

Number of Guests Attending		
Standard Fee (per Guest)	\$395	
Promotional Code Discount (per Guest)	-\$	Amount of discount from your Promotional Code
Group Discount (per Guest)	-\$	10+ guests = \$35 off per guest
Total Discount (per Guest)	-\$	Add Promotional Code Discount Line and Group Discount Line
Preferred Fee (per Guest)	\$	Subtract Total Discount Line from Standard Fee Line
Total Fee Amount Due	\$	Multiply Total Preferred Fee Line by Number of Guests Line

Please click here if you have any dietary or facility needs that require special consideration. A member of our Guest Services team will contact you soon to discuss how we may accommodate your request and make this event more enjoyable.

Cancellation Policy – Registrations are non-refundable; however, you may send a substitute.

Although Disney Institute is presenting this program, the sponsor of this program, Solution Infusion LLC, and not Disney Institute, is responsible for marketing and promoting this program, and for providing and/or arranging for the venue, facilities and other items for this program. This includes any food and beverage offered at or in connection with this program. Solution Infusion LLC is not an agent of Disney Institute or its affiliates, and Disney Institute and its affiliates assume no liability relating to the event or for the acts or omissions of Solution Infusion LLC.

This program will be presented by Disney Institute. By registering for this program, you understand and agree that we will share your registration information with Disney Institute for its use in connection with the program, including sending you an email requesting your participation in an optional survey regarding the program. We will also share your information with Disney Institute so that it may send you promotional materials regarding its products and services. If you do not wish to receive promotional materials from Disney Institute regarding its products and services, please check the box below.

I do not want to receive occasional updates, special offers, and other information from Disney Institute.

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Guest List (please complete for all Guests to ensure rapid event check -in and receive important event updates)

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