



**Registration Form**  
**Illinois Home Care Services Bootcamp**

**September 24, 2019**  
**Hinshaw & Culbertson, LLP**  
**151 N. Franklin St., Ste 2500**  
**Chicago, IL 60606**

**Registration fee**

Member or Non-member: \$129

Organization: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

1) Name: \_\_\_\_\_ Title: \_\_\_\_\_

**E-mail:** \_\_\_\_\_

2) Name: \_\_\_\_\_ Title: \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Please copy this form for additional registrants**

**Payment Information:** Total Due: \$ \_\_\_\_\_

Check Enclosed (payable to LeadingAge Illinois) or provide the credit card information below:

Check card type:      Visa                      MasterCard                      Discover                      American Express

Card Number: \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name on Card: \_\_\_\_\_

Credit Card Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**I authorize LeadingAge IL to charge my credit card for the amount shown above.**

Signature: \_\_\_\_\_

**Registration Information:**

- Fax the registration form to 630.325.9273. Forms must be received by deadline September 19, 2019.
- If paying by check, mail a copy of the form and check to:  
**LeadingAge Illinois, Dept. #10347, P.O. Box 87618, Chicago, IL 60680-0618.** Make check payable to LeadingAge Illinois.
- No refunds will be made after September 19, 2019. Cancellations on or prior to the deadline will receive a refund less a \$20 administrative fee. All cancellation requests must be made in writing. Fax cancellation requests to 630.325.9273 or email to [meetingservices@leadingageil.org](mailto:meetingservices@leadingageil.org).
- If you have questions e-mail: [meetingservices@leadingageil.org](mailto:meetingservices@leadingageil.org) or phone 630.325.6170.