

HBRC Seminar Registration Information

Mail to: The Claims Manager, Inc.
ATTN: Seminars
PO Box 579
Neptune, NJ 07754

Fax: 732-922-0244
Phone: 732-922-3162

Refund Policy: 100% if cancellation made 7 days prior to seminar date.

NAME _____

ADDRESS _____

HOME PHONE _____ WORK PHONE _____ CELL _____

EMAIL _____

Registration confirmation will be emailed to you.

CHECK YOUR CHOICE/S:	COST:	CHARGES:
____ Procedures, Diagnoses, Modifiers & More (May 7 am)	\$ 175.00	\$ _____
____ Evaluation & Management Codes Auditing (May 7 pm)	\$ 175.00	\$ _____
____ Discounted seminars package: May 7 am and May 7 pm	\$ 325.00	\$ _____
____ Health Insurance Coverage and Payments (May 21 am)	\$ 175.00	\$ _____
____ How to Tackle Your Accounts Receivables (May 21 pm)	\$ 175.00	\$ _____
____ Discounted seminars package: May 21 am and May 21 pm	\$ 325.00	\$ _____
____ CPC Exam Prep (August 16, full day)	\$ 145.00	\$ _____
TOTAL AMOUNT PAID/CHARGED		\$ _____

METHOD OF PAYMENT:

____ Check/Money Order ____ VISA/Mastercard ____ American Express
(Make check to *The Claims Manager, Inc*)

CREDIT CARD NUMBER _____

EXP DATE _____ SECURITY CODE _____

PRINT AUTHORIZED USER NAME _____

SIGNATURE OF AUTHORIZED USER _____

BILLING ADDRESS FOR CREDIT CARD _____

Classes are limited in size and are subject to cancellation.