

CHC Ethics in Consumer-Driven Health Plans Registration Form

This course is eligible for 3 hours of CE in Wisconsin and Minnesota. This course is offered from the National Association of Alternative Benefits Consultants (NAABC) to be used by the brokers of CHC (Cooperative Health Choices of Western Wisconsin). The cost of this course is \$85.00 and is payable to the NAABC. Please complete this form and return via fax to Linda Hines at 715-273-0147.

Are you a member of NAABC (*circle one*) Yes No

Name _____

Street Address or P.O. Box _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

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Home State: _____ Insurance License # _____

Webinar Course Date: (*please pick one*)

_____ June 17th, 2009 from 9 am to 12 pm central time

_____ July 8th, 2009 from 9 am to 12pm central time

Payment Options: Check appropriate choice

_____ 1. Check or Money Order

(*if mailing a check or money order, please fax this form to 715-273-0147*)

_____ 2. Credit Card # _____ Exp Date: ____/____/____

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Signature _____ Date: ____/____/____

Credit Card Type (*please circle one*) Amex Visa MasterCard

**All payments are made payable to the NAABC.
Please mail checks to: Linda Hines at 442 E Wall St., Ellsworth WI 54011**

For more information about NAABC you may go online at www.naabc.com

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