



East Hawaii IPA www.ehiipa.com

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**22nd Annual East Hawaii IPA Healthcare Symposium
Advancing Well-being for Patients, Providers and Organizations**

**The Fairmont Orchid Hawaii
Kohala Coast, Hawaii Island, Hawaii
August 17, 18 & 19, 2018**

Registration Form

Name: _____ Position: _____
Company: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone number (W): _____ (C) _____ Fax: _____
Email: _____

REGISTRATION FEES: (Please check)

- | | |
|--|----------|
| <input type="checkbox"/> General Participants (Outside of Hawaii) | \$525.00 |
| <input type="checkbox"/> In-State Hawaii Participants | \$275.00 |
| <input type="checkbox"/> East Hawaii IPA Members | \$75.00 |
| <input type="checkbox"/> Students (Must have current ID) - per day | \$50.00 |

(AAFP CME credits pending)

PAYMENT ENCLOSED: _____ (Please make checks payable to: East Hawaii IPA)

Please mail payment to:

East Hawaii IPA

670 Ponahawai St., Ste. 117

Hilo, Hawaii 96720

REGISTRATION DEADLINE: Friday, August 3, 2018 (Hotel Group Rate Deadline: July 13, 2018)
Space is limited, first come first served. No refunds after registration deadline.

For group rate hotel reservations: <https://aws.passkey.com/go/easthawaiiipa>

Hotel direct: 808-885-2000; Toll free global: 800-441-1414 Group name: East Hawaii IPA Symposium

Questions? Please contact Joyce Vitales at: jvital@ehiipa.com; Direct Line: 808-797-3113

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