

MASSACHUSETTS LEAGUE OF COMMUNITY HEALTH CENTERS

Community Board Member Symposium
Community Boards: Protecting & Nurturing a Community Asset

February 28, 2015
Embassy Suites
Boston/Waltham

REGISTRATION FORM

Please return your registration form along with your check made payable to the **MA League of Community Health Centers** and send to MA League of Community Health Centers, 40 Court Street, 10th Floor, Boston, MA 02108. Please return form with payment by Friday, February 20, 2015.

Online registration option: <https://www.regonline.com/massleague-chbs2015>

Session fee: \$30 for 1 registrant; \$50 for 2 registrants; \$60 for 3 registrants; \$80 for 4 or more registrants

	Name of Participant(s)	Title of Participant(s)	Vegetarian Meal?	
List Each Participant			YES <input type="checkbox"/>	NO <input type="checkbox"/>
			YES <input type="checkbox"/>	NO <input type="checkbox"/>
			YES <input type="checkbox"/>	NO <input type="checkbox"/>
			YES <input type="checkbox"/>	NO <input type="checkbox"/>
			YES <input type="checkbox"/>	NO <input type="checkbox"/>
Health Center:				
Street Address:				
City:		State:	Zip Code:	
Contact Person:		Title:		
Phone:		Email:		

Special Needs: _____

Any questions please contact Denise McCauley: dmccauley@massleague.org