



2012 Healthcare Supplier Institute Meeting  
April 9-10, 2012

## Provider Registration

Registration Information (please type or print)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Title \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone number \_\_\_\_\_

Email address \_\_\_\_\_

Assistant's Name \_\_\_\_\_

Assistant's Phone number \_\_\_\_\_

Assistant's email \_\_\_\_\_

Registration Fee:  
Free

Hotel Options:  
Madalay Bay Resort and Casino  
3950 Las Vegas Blvd. South  
Las Vegas, NV 89119

Room Rate:  
\$159 (mention the Healthcare  
Supplier institute or XHSP1M)

To Make Reservations:  
Call 1-877-632-7000

Attire:  
Business Casual

Contact Information:  
Harla Adams at hadams@nihcl.com or  
817-842-2331

————— Please remit registration via fax to 678 623 3495