

TEXAS LICENSING STANDARDS FOR ASSISTED LIVING FACILITIES TAC TITLE 40, PART 1, CHAPTER 92

Fax your completed Registration Form to 512-336-1008 or Email to missy@CHAseminars.com
 You will receive an Email confirmation within one (1) business day.

Seminar Selection	Please circle the days & registration fees				Hrs	Fees	Check/Cash Discount
Review the minimum standards a facility must meet to be licensed as an assisted living facility and serve as a basis for licensure survey activities.	Thurs Sept 14 8am	Thurs Oct 5 8am	Thurs Nov 9 8am	Thurs Dec 7 8am	8	\$ 185	\$ 175
Total Hours & Registration Fees							

Registration & Payment Information This information is used exclusively by CHA Seminars

Name		Facility Name	
Professional License/Certificate	LNFA # & State Renewal Date	ALM/CALM # Renewal Date	HH/HCSSA # Renewal Date
Home Address Street Address, City, State, Zip			
Home Email		Work Email	
Home Phone	Cell Phone	Work Phone	

Debit/Credit Card Authorization (no discount)	Bank Draft Authorization (for discount)
Card Type AmEx Discover MasterCard Visa	Acct Type Business Personal Checking Savings
Acct#	Routing#
Exp Date Security Code	Account#
Name on card	Acct Holder
Billing Address	Bank Name
City, State, Zip	City, State, Zip

I authorize CHA Seminars to charge my debit/credit card for the seminar fees or draft my bank account for the discounted fees above.

Signature Date

Remit payment to CHA Seminars at 2514 Stenson Dr, Cedar Park TX 78613