

## 12-HR CEU SELF-STUDY PACKAGE Home Health Admins & Alt Admins

**Meets Texas Annual CEU Requirements in \$558.260**

Fax your completed Registration Form to 512-336-1008 or Scan/Email to missy@CHASeminars.com

You will receive an Email confirmation within one (1) business day.

CEU 12-HR PACKAGE	Hrs	Fees	Check Discount		
<b>Please choose one course from each list</b>					
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top; padding: 5px;"> <b>List A – 6 hrs</b>                      Infection Control                      Morals in Patient Care                      Legacy Leadership Book 1                      Legacy Leadership Book 2                      Legacy Leadership Book 3                      Legacy Leadership Book 4                 </td> <td style="width: 50%; vertical-align: top; padding: 5px;"> <b>List B – 6 hrs</b>                      Compliance &amp; Patient Care                      HIPAA General Overview                      OSHA Compliance &amp; Inspections                      Work Smart ~ Be Safe                      Workplace Safety &amp; Emergency                      Preparedness                 </td> </tr> </table>	<b>List A – 6 hrs</b> Infection Control Morals in Patient Care Legacy Leadership Book 1 Legacy Leadership Book 2 Legacy Leadership Book 3 Legacy Leadership Book 4	<b>List B – 6 hrs</b> Compliance & Patient Care HIPAA General Overview OSHA Compliance & Inspections Work Smart ~ Be Safe Workplace Safety & Emergency Preparedness	12	\$ 208	\$ 198
<b>List A – 6 hrs</b> Infection Control Morals in Patient Care Legacy Leadership Book 1 Legacy Leadership Book 2 Legacy Leadership Book 3 Legacy Leadership Book 4	<b>List B – 6 hrs</b> Compliance & Patient Care HIPAA General Overview OSHA Compliance & Inspections Work Smart ~ Be Safe Workplace Safety & Emergency Preparedness				

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

Name		Facility Name	
Professional License/Certificate	NFA # State & Renewal	CALM # State & Renewal	Other (Type) State & Renewal
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	
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

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