

Registration Form

29th Annual Medical Missions Seminar, Fort Worth, Texas
January 21-22, 2011

Sponsored by and checks payable to:
IHCF/African Christian Hospitals, 102 N Locust St, Searcy, AR 72143
501-268-9511

Please Print

Name of Registrant: _____

Additional Registrant(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Please Check:

M.D. (Specialty) _____; O.D. _____; R.N. _____; L.P.N. _____

D.O. (Specialty) _____; D.D.S. (Specialty) _____

Other Profession _____

Do you participate in medical mission trips? We would like to know more about your trip. Where? When?
What congregation or organization? _____

Early Bird Registration before Dec. 15	\$ 30.00 per person	x _____	\$ _____
Registration Fee (after Dec. 15)	\$ 40.00 per person	x _____	\$ _____
Banquet Ticket (<i>Friday Evening</i>) (<i>Please pre-register for banquet</i>)	\$ 30.00 per person	x _____	\$ _____
Students - Registration	\$ 15.00 per person	x _____	\$ _____
Students - Banquet Ticket	\$ 15.00 per person	x _____	\$ _____

I would like to contribute toward the overall expenses
of the seminar, or for a student who cannot pay. \$ _____

TOTAL \$ _____
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If you are a student, will you attend the medical student luncheon on Friday?

(The luncheon is free of charge and open to students of health care occupations) Yes _____ No _____

Pre-registration for the seminar is available until January 13, 2011.

IMPORTANT: Make your room reservations by January 9, 2011 - Don't forget to say you're with International Health Care Foundation. **Marriott DFW Airport South: 1-800-228-9290**

Guest rooms and seminar are at same location:

Marriott DFW Airport South - 4151 Centrepont Blvd, Fort Worth, TX 76155

The guest room rate is \$95.00 per night until January 13, 2011 for our block of rooms