

PARTICIPANT APPLICATION FORM



MAY 11-13, 2010 - SCHOEDINGER FUNERAL AND CREMATION SERVICE

REGISTRATION FEE: \$250.00

COLUMBUS, OH

Thank you for your interest in this Selected Connections program! Please complete this application form and send it, along with the registration fee, to Headquarters. Participants are responsible for transportation, hotel, meals and other incidental costs. Number of participants is limited. Applications are filled on a first-come, first-served basis.

Mail completed form and check (made payable to Selected Independent Funeral Homes) to:
Selected Independent Funeral Homes - Selected Connections
500 Lake Cook Road, Suite 205; Deerfield, IL 60015

Fax completed registration form including credit card information to:
847-236-9968

Participant's Name

Title

Funeral Home Name

Address

City

State/Province

Postal Code

Phone

Fax

Email

Emergency Contact Information:

Contact Name

Relationship

Phone

Email

I HAVE READ AND AGREE TO THE FOLLOWING GUIDELINES:

- I agree to view the Selected Connections program as a professional development opportunity and thus conduct myself appropriately.
- I agree to pay the required registration fee.
- I agree to complete and submit an evaluation form to Selected Independent Funeral Homes within two weeks of completion of the Selected Connections program.
- I agree to the terms and conditions listed on the Participant Information sheet.

Participant's Signature

Date

Employer's Name

Title

Employer's Signature

Date

PAYMENT METHOD:

Check enclosed American Express Discover MasterCard Visa

Account Number

Expiration

Cardholder Name
