



5th National Harold Rogers Prescription Drug Monitoring Program

September 24-25, 2009
Liaison Capitol Hill Hotel
Washington, D.C.



REGISTRATION FORM

Registration must be received by 5:00 p.m. Eastern Time on August 25, 2009. There is no registration fee. To reserve your room, please contact the hotel directly at 202-638-1616 as soon as possible. Reference our meeting Harold Rogers PDMP National meeting to obtain the federal per diem room rate of \$233 per night.

Please type or print clearly, using one form per registrant. Please indicate your name, title, organization and state as you want them to appear on your nametag.

Name Mr. or Ms.: _____

Title: _____

Organization: _____

Address Line 1: _____

Address Line 2: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____

Fax: _____

Email Address: _____

Please advise us as soon as possible of any medical dietary needs, ADA requirements or any other special assistance that you require, so we can be responsive to your needs.

Please complete this form electronically and send via email to Chris Baumgartner at:
assist@pmpalliance.org

Registration forms may also be mailed to Chris at the following address:

Chris Baumgartner
Program Coordinator - ASPMP
3134 83rd Avenue SW
Olympia, WA 98512

If you have questions or require additional information about the conference please contact Chris at 360-556-7152 or at the email address shown above.