

Please use one form per registrant.

2022 Alcalde Conference Onsite Registration

Name (First & Last): _____

Nickname (First name for badge, if different than above): _____

Mailing Address: _____

City, State Zip: _____ Phone: _____

E-mail Address: _____

Employer/Institution: _____

Title: _____ Employer City: _____

☐ Special Dietary/Accessibility Need(s): _____

Alcalde Southwest Leadership Conference	Pharmacists: ☐ - Preceptor ☐ - Resident ☐ - Fellow	Student	SUBTOTAL
ALCALDE CONFERENCE (Wed. 5/11 - Thurs. 5/12): All Alcalde CPE & meals.			
May 1 - Onsite	☐ - \$350	☐ - \$200	
Alcalde Registration Sub-Total:			

Please RSVP to reserve your seat for Alcalde Conference meals. One (1) ticket to each of the events is included in your registration fee.

EVENT:	WILL YOU ATTEND? (INCLUDED)		EXTRA TICKETS Qty Cost		SUB-TOTAL
Alcalde Breakfast	☐ - YES	☐ - NO		\$40	
Alcalde Lunch	☐ - YES	☐ - NO		\$40	
Make my meal(s) kosher	Additional \$25 per meal				
Alcalde Meal Tickets Sub-Total:					

ALCALDE CONFERENCE GRAND TOTAL: \$.

NOTIFICATIONS: PLEASE READ CAREFULLY. REGISTRATION FOR THE EVENT IMPLIES YOUR ACCEPTANCE OF THE FOLLOWING:

I ACKNOWLEDGE: TSHP reserves the right to use any photography/ videography taken during the Annual Seminar or at any event without the expressed written permission of those included within the photograph.

I ACKNOWLEDGE: All requests for refunds must be in writing. A \$50 administrative fee will be charged for all refunds. No refunds after April 1. Payments to TSHP are not deductible as charitable contributions for federal income purposes. However, they may be deductible under other provisions of the IRS Code.

PAYMENT INFORMATION

Credit Card #: _____
CVV security code: _____ Exp. Date: _____
Billing Address: _____
City: _____ State: _____ Zip: _____
Name on Card: _____
Signature: _____
Receipt Email: _____

Cash, Credit Card, and Checks accepted.
Make check payable to: TSHP R&E Foundation
Tax ID #23-7296288