**2020 CPHA VIRTUAL Annual Conference**

**Group Registration Form**

**November 10th - 12th 2020**

**Fill out a row for each attendee. Print out more sheets if your group is larger than 10 people.**

**Please email the completed form to cpha@cpha.info**

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|  |  | **Registrant Name** | **Registrant’s Membership Status**  **(i.e. Non-member, Member, Student)** | **Registrant’s Email Address** |
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