

**Unable to attend the IHCA Convention & Expo?
Were you at the in-person event but missed out on certain sessions?**

WE'VE GOT YOU COVERED!

**Most of the sessions from the in-person event have been recorded and are
available for purchase.**

That's the potential for more than 40 hours of continuing education!

RECORDINGS AVAILABLE FOR A LIMITED TIME ONLY!

FACILITY REGISTRATION*

Large Group - 11 to 20 logins with access to ALL session recordings

Member fee \$1295 (Discounted fee \$300)

Non-member fee \$1895 (Discounted fee \$450)

Small Group - Up to 10 logins with access to ALL session recordings

Member fee \$1095 (Discounted fee \$200)

Non-member fee \$1595 (Discounted fee \$350)

INDIVIDUAL REGISTRATION

One login with access to ALL session recordings

Member fee \$750

Non-member fee \$895

A la Carte Registration

One login for specifically chosen recordings

Member fee \$175 per recording

Non-member fee \$225 per recording

***If your facility registered and paid for the in-person convention, you
qualify for the discounted fee. Contact IHCA for a discount code.**

REGISTRATION FORM

Contact Name_____

Facility Name_____

Address_____

City_____ State_____ Zip_____

Phone_____ Contact Email_____

REGISTRATION FEES

____ IHCA Member ____ Non-Member ____ LTCNA Member

____ Facility Registration (Large Group) _____

____ Facility Registration (Large Group - attended in-person event) _____

____ Facility Registration (Small Group) _____

____ Facility Registration (Small Group - attended in-person event) _____

____ Individual Registration _____

____ A La Carte Registration (Registrant/First Session) _____

____ Additional A La Carte Sessions _____

TOTAL_____

____ Check Enclosed

Charge to: ____ Visa ____ Mastercard ____ American Express ____ Discover

Credit Card Number_____

Exp. Date_____ Security Code_____

Name on Credit Card_____

Credit Card Billing Address_____

City_____ State_____ Zip_____

Return with payment to:

Illinois Health Care Association
1029 S. Fourth Street
Springfield, IL 62703

Fax: 217.528.0452

Email: asnavely@ihca.com

Register Online: [Click here](#)

Registrant Information

Email Address

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REGISTRATION FORM

A La Carte Session Registration

***Please Note:** You must complete page 2 of this registration form along with the information below to register for sessions a la carte.

Attendee Name _____

Attendee Email _____

Please list the session codes (e.g. T102) for the sessions you would like to purchase. To view session descriptions and find session codes, [click here](#) to view the Virtual Convention Session Guide.

SESSION CODES

If you are interested in purchasing more than four (4) sessions, please complete an Individual Registration.

If you have any questions, please contact Ashley Snavelly at asnavelly@ihca.com.