

2019 CHIA Convention Registration Form



Hyatt Regency Indian Wells, Indian Wells, California

<hr/> AHIMA Number	CHIA Member? <input type="checkbox"/> Yes <input type="checkbox"/> No	First Timer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Address Type: <input type="checkbox"/> Work <input type="checkbox"/> Home
<hr/> First Name	<hr/> Last Name	<hr/> Credentials	
<hr/> Address	<hr/> City/State/Zip	<hr/> ()	
<hr/> Primary Email	<hr/> Employer	<hr/> Job Title	

1. Full Registration (Monday thru Wednesday)

Includes admission to general/concurrent sessions, Exhibit Hall, Welcome Reception, CHIA Celebration Party and Networking Luncheon.

	Advanced <small>(by May 8)</small>	Regular <small>(by May 29)</small>	Your Fee
CHIA Member*	<input type="checkbox"/> \$445	<input type="checkbox"/> \$545	_____
AHIMA Member in CA**	<input type="checkbox"/> \$495	<input type="checkbox"/> \$595	_____
Non Member	<input type="checkbox"/> \$545	<input type="checkbox"/> \$645	_____
CHIA Student Member*	<input type="checkbox"/> \$195	<input type="checkbox"/> \$245	_____
CHIA Past President*			<input type="checkbox"/> N/C

2. Approved CHIA Student Volunteer*

Includes admission to general/concurrent sessions and Exhibit Hall. Separate fee for CHIA Celebration Party and Networking Luncheon.

N/C

3. Single Day & Exhibit Only Registration

Includes admission to general/concurrent sessions and Exhibit Hall. Specify which day(s):

Monday Tuesday Wednesday

	Advanced <small>(by May 8)</small>	Regular <small>(by May 29)</small>	Your Fee
CHIA Member*	<input type="checkbox"/> \$210	<input type="checkbox"/> \$260	_____
AHIMA Member in CA**	<input type="checkbox"/> \$260	<input type="checkbox"/> \$310	_____
Non Member	<input type="checkbox"/> \$270	<input type="checkbox"/> \$320	_____
CHIA Student Member*	<input type="checkbox"/> \$95	<input type="checkbox"/> \$125	_____

Includes admission to Exhibit Hall only.

Exhibit Hall Pass - Total Days _____ x \$50 = _____

4. Pre-Convention Tutorials

	Advanced <small>(by May 8)</small>	Regular <small>(by May 29)</small>	Your Fee
Saturday			
1. RHIT/RHIA Exam Prep	<input type="checkbox"/> \$100	<input type="checkbox"/> \$120	_____
2. CHPS & HIPAA Best Practices w/Exam Prep book	<input type="checkbox"/> \$125 <input type="checkbox"/> \$199	<input type="checkbox"/> \$145 <input type="checkbox"/> \$219	_____
3. SQL for the Absolute Beginner	<input type="checkbox"/> \$125	<input type="checkbox"/> \$145	_____
4. CCS Exam Prep	<input type="checkbox"/> \$125	<input type="checkbox"/> \$145	_____
Sunday			
5. Vascular/Non-Vascular I/R Hot Topics	<input type="checkbox"/> \$65	<input type="checkbox"/> \$75	_____
6. Coding Audits	<input type="checkbox"/> \$65	<input type="checkbox"/> \$75	_____
7. CDIP Exam Prep	<input type="checkbox"/> \$65	<input type="checkbox"/> \$75	_____
8. CHIA Student Academy	<input type="checkbox"/> Complimentary		_____
9. CCA Exam Prep	<input type="checkbox"/> \$55	<input type="checkbox"/> \$65	_____

5. Special Event Tickets

Tickets included with full registration. Extra tickets available for purchase for single-day registrants, student volunteers, exhibitors and guests.

Welcome Reception	<input type="checkbox"/> \$25	_____
CHIA Celebration Party	<input type="checkbox"/> \$60	_____
Leadership Luncheon	<input type="checkbox"/> \$30	_____

Total Fees Enclosed

\$ _____

RSVP Requested

Full Registrants: Help us plan for these events by checking the RSVP box if you plan to attend:

Welcome Reception	<input type="checkbox"/> RSVP
CHIA Celebration Party	<input type="checkbox"/> RSVP
Leadership Luncheon	<input type="checkbox"/> RSVP

Note any special needs: _____

I am not interested in learning about the latest HIM products and services from Exhibitors. Please remove my contact information from the exhibitor convention mailing list.

* Discounted fees are applicable only to CHIA Members.

** Includes annual dues to join CHIA.

Payment must accompany registration form. A copy of an approved check-request is acceptable when submitted with the registration form. There will be an additional \$50 fee for on-site registrations.



1. **Online:** CaliforniaHIA.org
2. **Email:** Register@CaliforniaHIA.org
3. **Fax:** 559.251.5836
4. **Mail:** CHIA, 5055 E. McKinley Ave. Fresno, CA 93727-1964

Questions Call 559.251.5038 No phone reservations, please.

Method of Payment

Please make check payable to CHIA or pay by credit card.

We accept:

Card No.: _____ Exp. Date: _____

Cardholder Signature: _____

Print Cardholder Name: _____

Cardholder Address/Zip: _____