

MELAMEDIA LLC

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Alexandria, VA 22308
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www.melamedia.com

Publishers of

Health Information Privacy/Security Alert

Best Practices for Sharing Patient Data with Law Enforcement

Wednesday Oct. 25, 2017
1 pm – 2 pm Eastern

Please fax the completed registration form to: 888-965-3678 or return the form with payment to Melamedia LLC

Name _____

Title _____

Company Name _____

Street Address _____

Street Address 1 _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____

REQUIRED

Back-Up Email _____

COST -- all order comes with course materials

SUBTOTAL

_____ On Demand for 6 Months \$259 \$ _____

_____ E Sub to Health Information Privacy/Security Alert \$258 \$ _____

(celebrating its 20th year)

Total \$ _____

Payment Information

_____ Visa _____ MasterCard _____ AMEX PO # _____ _____ Check Enclosed

Name on Card: _____

Card Number: _____ Expiration Date _____

Signature: _____ Date _____

PAYMENTS SHOULD BE MADE TO:
MELAMEDIA LLC
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