

# Health Education Partners

## Course Registration Form

### Healthy People 2020: Be Ready to Use It

[www.healthedpartners.org/ceu/hp2020](http://www.healthedpartners.org/ceu/hp2020)

Please send this form with a check or money order for \$25 for the self-study course payable to Health Education Partners. Send to:

Health Education Partners  
c/o Jim Grizzell  
2953 Kacour Ave  
North Port, FL 34288

Name: \_\_\_\_\_

Street / P.O. Box: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E - mail: \_\_\_\_\_

### Payment Information

The registration fee covers tuition expenses and materials and issuance of completion certificate.

**Refunds:** Less a \$10 administrative fee. If you pay by PayPal you will be able to get a full refund if let us know within 60 days of signup and if after 60 days only \$5 fee if pay through PayPal

Attached is my check or money order made payable to Health Education Partners

### Questions? Contact me!

Health Education Partners  
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