

Health Education Partners

Course Registration Form

Using MAP-IT to “Assess” for Healthy People 2020

www.healthedpartners.org/ceu/hp2020mapitassess

Please send this form with a check or money order for \$30 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, however, you pay by PayPal you will be able to get a full refund if you let us know within 60 days of signup and if you let us know after 60 days there is a \$5 administrative fee if paid through PayPal.

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

Questions? Contact me!

Health Education Partners
Jim Grizzell
MBA, MA, MCHES, ACSM-HFS, FACHA
909-856-3350
jimgrizzell@healthedpartners.org
www.healthedpartners.org

Thank you for supporting the Community Tool Box (CTB). Healthy People 2020 uses many of its resources. \$5 of the \$30 course fee supports CTB's research and development and the long-term sustainability of this free global resource.

