



## Course Registration Form Social Marketing Overview

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

Please send this form with a check or money order for \$12 for the 2 CECHs 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:** \_\_\_\_\_

**Email:** \_\_\_\_\_

### Payment Information

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

**Refunds:** No refunds since admin costs are \$12. If you pay by [PayPal](#) you will be able to get a full refund if you let us know within 60 days of sign up or \$5 refund after 60 days.

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

**You can get started immediately by going to this website:**

[www.healthedpartners.org/ceu/smo/thankyou signups mo.html](http://www.healthedpartners.org/ceu/smo/thankyou signups mo.html)

### Questions? Contact me!

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