



## Course Registration Form

### Healthy People 2030 in Your Work

[www.healthedpartners.org/ceu/hp2030.html](http://www.healthedpartners.org/ceu/hp2030.html)

Please send this form with a check or money order for \$35.00 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: \_\_\_\_\_

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

### Payment Information

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

**Refunds:** Less a \$10 administrative fee. If you pay through [PayPal](https://www.paypal.com) (no PayPal account needed, pay with credit card or echeck) you will be able to get a full refund if you let us know within 60 days of signup or \$35.00 refund after 60 days. No refunds if a completion certificate has been awarded.

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

**Get started now by going to this website and downloading the Study Guide:**

[www.healthedpartners.org/ceu/hp2030/thankyou\\_signup\\_hp2030.html](http://www.healthedpartners.org/ceu/hp2030/thankyou_signup_hp2030.html)

### Questions? Contact me!

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