



## 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 \$10 for the 2 credit unit self-study course payable to Health Education Partners. Send to:

Health Education Partners  
c/o Jim Grizzell  
1805 S. Grant St.  
Arlington, VA 22202

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:** Refund fee is \$10. If you pay by [PayPal](#) you will be able to get a full refund within 60 days of signup.

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

### Questions? Contact me!

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