



Economic Impact of Health Care Regulations TOWN HALL MEETINGS

Registration San Francisco, CA - February 2, 2006

The deadline for preregistration is January 30

After the deadline, individuals may still register for the meeting, but they may not receive preprinted name badges, or have their names included in the participants list that will be distributed at the meeting.

Title: (Circle one) Dr. Honorable Miss Mr. Mrs. Ms. Rev. None

***First Name:** _____ ***Last Name:** _____

Preferred First Name to Be Used on Badge: _____

Job Title: _____

***Organization:** _____

***Address:** _____

(please provide an address suitable for overnight delivery, no P.O. boxes)

***City:** _____ ***State:** _____ ***Zip Code:** _____

Telephone: _____ **Alternate Telephone:** _____

Fax: _____ **E-mail:** _____

Preferred Method of Contact for Registration Confirmation: (Circle one) E-mail Fax Telephone Mail

Please indicate any accessibility requirements: (e.g., wheelchair ramp access, sign language interpretation)

Please indicate your primary area of interest concerning health care regulations:

Do you intend on making public comments at this Town Hall Meeting? ___ Yes ___ No

Note: Public comments must be kept to 3-5 minutes

Are you a Federal Government employee? ___ Yes ___ No

Are you a panelist for this Town Hall Meeting? ___ Yes ___ No

***May we publish the contact information you specified on this registration page in all materials -- including a participants list to be distributed at the meeting and various reports -- that will be generated by the Government to document the results from this Town Hall Meeting?** ___ Yes ___ No

If you require additional help with this registration, please contact:

Ms. Bridgette Saunders, CMP
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Silver Spring, MD 20910
Telephone: 301-628-3158
Fax: 301-628-3101
E-mail: bsaunders@s-3.com

For individuals attending the meetings who wish to submit documentation to support their comments:
TownHallMeetingsDocuments@hhs.gov .

* Indicates required information