

REGISTRATION

SCCE's Compliance & Ethics Institute | Las Vegas, Nevada | September 13–16, 2009

Name: _____
(please type or print)

STEP 1 Demographic Information

Please fill out the following information. Sharing your demographic information with SCCE will help us create better networking opportunities for you.

What titles best describe your job? Select all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Academic/Professor | <input type="checkbox"/> Compliance Officer |
| <input type="checkbox"/> Administration | <input type="checkbox"/> Compliance Specialist |
| <input type="checkbox"/> Analyst | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Asst Compliance Officer | <input type="checkbox"/> Controller |
| <input type="checkbox"/> Attorney (In-House Counsel) | <input type="checkbox"/> Corporate Responsibility and Performance |
| <input type="checkbox"/> Attorney (Outside Counsel) | <input type="checkbox"/> Ethics & Integrity Officer |
| <input type="checkbox"/> Audit Analyst | <input type="checkbox"/> Executive Director |
| <input type="checkbox"/> Audit Manager/Officer | <input type="checkbox"/> General Corporate Counsel |
| <input type="checkbox"/> Billing Manager/Officer | <input type="checkbox"/> Human Resources |
| <input type="checkbox"/> Charger Master | <input type="checkbox"/> Information Technology |
| <input type="checkbox"/> Chief Compliance Officer | <input type="checkbox"/> Nurse |
| <input type="checkbox"/> Chief Executive Officer | <input type="checkbox"/> Privacy Officer |
| <input type="checkbox"/> Chief Financial Officer | <input type="checkbox"/> President |
| <input type="checkbox"/> Chief Information Officer | <input type="checkbox"/> Quality Assurance |
| <input type="checkbox"/> Chief Medical Officer | <input type="checkbox"/> Regulatory Affairs |
| <input type="checkbox"/> Chief Operating Officer | <input type="checkbox"/> Reimbursement Coordinator |
| <input type="checkbox"/> Clinical | <input type="checkbox"/> Risk Management |
| <input type="checkbox"/> Coder | <input type="checkbox"/> Security/Services Technology |
| <input type="checkbox"/> Compliance Analyst | <input type="checkbox"/> Trainer/Educator |
| <input type="checkbox"/> Compliance Coordinator | <input type="checkbox"/> Vice President |
| <input type="checkbox"/> Compliance Director | <input type="checkbox"/> OTHER (please indicate below) |
| <input type="checkbox"/> Compliance Fraud Examiner | |

List others not listed here: _____

What year did you start in Compliance? _____

What certifications do you hold? Select all that apply.

- | | | | |
|--------------------------------|-------------------------------|--------------------------------|-------------------------------|
| <input type="checkbox"/> ACHE | <input type="checkbox"/> CFE | <input type="checkbox"/> FHFMA | <input type="checkbox"/> MSHA |
| <input type="checkbox"/> APA | <input type="checkbox"/> CHC | <input type="checkbox"/> ISS | <input type="checkbox"/> MSN |
| <input type="checkbox"/> BA | <input type="checkbox"/> CHE | <input type="checkbox"/> JD | <input type="checkbox"/> MT |
| <input type="checkbox"/> BBA | <input type="checkbox"/> CHP | <input type="checkbox"/> LLM | <input type="checkbox"/> NHA |
| <input type="checkbox"/> BS | <input type="checkbox"/> CIA | <input type="checkbox"/> MA | <input type="checkbox"/> PhD |
| <input type="checkbox"/> BSN | <input type="checkbox"/> CPA | <input type="checkbox"/> MBA | <input type="checkbox"/> RHIA |
| <input type="checkbox"/> CCEP | <input type="checkbox"/> CPC | <input type="checkbox"/> MHA | <input type="checkbox"/> RHIT |
| <input type="checkbox"/> CEM | <input type="checkbox"/> CPHQ | <input type="checkbox"/> MPA | <input type="checkbox"/> RN |
| <input type="checkbox"/> CCS | <input type="checkbox"/> DDS | <input type="checkbox"/> MPH | |
| <input type="checkbox"/> CCS-P | <input type="checkbox"/> ESQ | <input type="checkbox"/> MS | |

List others not listed here: _____

What best describes the industry you work for? Select all that apply.

- | | |
|--|--|
| <input type="checkbox"/> Accounting/Auditing | <input type="checkbox"/> Hospitality/Tourism |
| <input type="checkbox"/> Administrative and Support Services | <input type="checkbox"/> Human Resources/Recruiting |
| <input type="checkbox"/> Advertising/Marketing/ Public Relations | <input type="checkbox"/> Information Technology |
| <input type="checkbox"/> Aerospace/Aviation/Defense | <input type="checkbox"/> Installation/Maintenance/Repair |
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Insurance |
| <input type="checkbox"/> Airlines | <input type="checkbox"/> Internet/E-Commerce |
| <input type="checkbox"/> Architectural Services | <input type="checkbox"/> Law Enforcement/Security Services |
| <input type="checkbox"/> Arts/Entertainment/Media | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Automotive/Motor Vehicles/Parts | <input type="checkbox"/> Manufacturing and Production |
| <input type="checkbox"/> Banking | <input type="checkbox"/> Military |
| <input type="checkbox"/> Biotechnical and Pharmaceutical | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Chemical/Polymers/Fibers | <input type="checkbox"/> Operations Management |
| <input type="checkbox"/> Computer Hardware | <input type="checkbox"/> Personal Care and Service |
| <input type="checkbox"/> Computer Services | <input type="checkbox"/> Publishing/Printing |
| <input type="checkbox"/> Computer Software | <input type="checkbox"/> Purchasing |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Real Estate/Mortgage |
| <input type="checkbox"/> Consulting Services | <input type="checkbox"/> Research & Development |
| <input type="checkbox"/> Consumer Products | <input type="checkbox"/> Restaurant and Food Service |
| <input type="checkbox"/> Customer Service/Call Center | <input type="checkbox"/> Retail/Wholesale |
| <input type="checkbox"/> Education/Training/Library | <input type="checkbox"/> Science |
| <input type="checkbox"/> Electronics | <input type="checkbox"/> Sports and Recreation/Fitness |
| <input type="checkbox"/> Energy | <input type="checkbox"/> Supply Chain/Logistics |
| <input type="checkbox"/> Engineering | <input type="checkbox"/> Telecommunications |
| <input type="checkbox"/> Environmental Services | <input type="checkbox"/> Textiles |
| <input type="checkbox"/> Finance/Economics | <input type="checkbox"/> Tobacco |
| <input type="checkbox"/> Financial Services | <input type="checkbox"/> Transportation/Warehousing |
| <input type="checkbox"/> Forest Products | <input type="checkbox"/> Veterinary Services |
| <input type="checkbox"/> Government/Policy | <input type="checkbox"/> Utilities |
| <input type="checkbox"/> Healthcare | <input type="checkbox"/> Waste Management Services |
| <input type="checkbox"/> Higher Education | <input type="checkbox"/> OTHER (please indicate below) |

List others not listed here: _____

What is the corporate structure of your organization?

- For-profit
 Non-profit

How many employees does your organization have?

- | | | |
|--------------------------------------|--|--|
| <input type="checkbox"/> 1–50 | <input type="checkbox"/> 3,001–4,000 | <input type="checkbox"/> 20,001–30,000 |
| <input type="checkbox"/> 51–100 | <input type="checkbox"/> 4,001–5,000 | <input type="checkbox"/> 30,001–50,000 |
| <input type="checkbox"/> 101–250 | <input type="checkbox"/> 5,001–7,500 | <input type="checkbox"/> 50,001–75,000 |
| <input type="checkbox"/> 251–500 | <input type="checkbox"/> 7,501–10,000 | <input type="checkbox"/> 75,001+ |
| <input type="checkbox"/> 501–1,500 | <input type="checkbox"/> 10,001–15,000 | |
| <input type="checkbox"/> 1,501–3,000 | <input type="checkbox"/> 15,001–20,000 | |

Registration continues on next page (over)

Please tell us if you are a first-time attendee of this conference:

- This is my first annual Compliance & Ethics Institute

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STEP 2

Please type or print your contact information.

Mr. Mrs. Ms. Dr.

SCCE Member ID

First MI Last

Credentials (CCEP, CPA, CFE, etc.)

Title

Place of Employment

Address

City State Zip

Phone

Fax

E-mail (required for confirmation notification & Conference information)

STEP 3 Choose Your Sessions

Please select sessions & networking events to assist SCCE in room planning. Choices are not binding. Please select only ONE session per time slot.

Saturday, September 12, 2009

3rd Annual Volunteer Project | 7:00 AM-3:30 PM

Sunday, September 13, 2009

Pre Conf | 9:00 AM-12:00 PM | P1 P2 P3

Pre Conf | 1:00-4:00 PM | P4 P5 P6

Opening Reception | 4:00-5:30 PM

Authors' Reception | 5:00-6:00 PM

Monday, September 14, 2009

Breakout Sessions | 11:00 AM-12:00 PM

101 102 103 104 105

Breakout Sessions | 1:30-2:30 PM

201 202 203 204 205 Interactive Workshop

Breakout Sessions | 3:00-4:00 PM

301 302 303 304 305 Interactive Workshop

Breakout Sessions | 4:30-5:30 PM

401 402 403 404 405

Continental Breakfast | 7:00-8:00 AM

Networking Luncheon | 12:00-1:00 PM

Networking Reception | 5:30-7:00 PM

5th Annual International Compliance Awards Banquet | 7:00-10:00 PM

Tuesday, September 15, 2009

Breakout Sessions | 11:00 AM-12:00 PM

501 502 503 504 505

Breakout Sessions | 1:30-2:30 PM

601 602 603 604 605 Interactive Workshop

Breakout Sessions | 3:00-4:00 PM

701 702 703 Interactive Workshop

Breakout Sessions | 4:30-5:30 PM

801 802 803

Continental Breakfast | 7:00-8:00 AM

Networking Lunch | 12:00-1:00 PM

Wednesday, September 16, 2009

Post Conf | 8:00 AM-12:00 PM | W1 W2 W3

CLICK HERE TO REGISTER ONLINE NOW

CLICK HERE TO ADD THIS CONFERENCE TO YOUR PC'S CALENDAR

STEP 4 Choose Your Registration

- SCCE Members \$949
- Membership Renewal & Registration \$1,244
- Non-Members \$1,099
- New Membership & Registration* \$1,149
- Pre-Conference Registration Morning.....\$125
- Pre-Conference Registration Afternoon.....\$125
- Post-Conference Registration.....\$125
- Conference Binders \$75

*New members only. (Dues regularly \$295 annually.)

TOTAL:

STEP 5 Payment

- Check enclosed (payable to SCCE)
- Invoice me Purchase Order # _____
- Charge my: AmEx Visa MasterCard

Credit Card Account Number

Expiration Date on Card

Cardholder's Name

Cardholder's Signature

Code: CEI09

MAIL Include registration form with check payable to: SCCE, 6500 Barrie Road, Suite 250, Minneapolis, MN 55435, United States

ONLINE Visit www.complianceethicsinstitute.org

FAX to +1 952 988 0146 (including billing information)

QUESTIONS? Call +1 952 933 4977 or 888 277 4977 (U.S. & Canada) or e-mail helpteam@corporatecompliance.org

PAYMENT TERMS

Checks are payable to SCCE. Credit cards accepted: American Express, MasterCard, or Visa. SCCE will charge your credit card the correct amount should your total be miscalculated.

Group Discounts: \$100 per person for five or more from the same company, based on membership status; only if each attendee completes a registration and they are faxed or mailed in simultaneously.

Tax Deductibility: All expenses incurred to maintain or improve skills in your profession may be tax deductible; including tuition, travel, lodging and meals. Please consult your tax advisor (Federal tax ID # 23-2882664).

Cancellations/Substitutions: No refunds will be given for "no-shows" or cancellations. You may send a substitute, or receive a credit for other conferences to be used within one year. Please call Patti Hoskin at +1 952 933 4977 or 888 277 4977 or e-mail patti.hoskin@corporatecompliance.org.

