



*First Nations Health Managers Association*  
*Association des gestionnaires de santé des Premières Nations*

**CERTIFIED FIRST NATION HEALTH  
 MANAGER PROGRAM (CFNHMP)  
 REGISTRATION FORM**

<b>First Name:</b>		<b>Last Name:</b>		<b>FNHMA Member #:</b>	
<b>Organization Name:</b>			<b>Position:</b>		
<b>Street Address:</b>					
<b>City:</b>		<b>Province:</b>		<b>Postal Code:</b>	
<b>Telephone:</b>					
<b>Email:</b>					
<b>Fees:</b>		<b>Select your course(s):</b>		<b>Online session start dates:</b>	
<b>Online Format</b> <input type="checkbox"/> <b>FNHMA Member \$750</b> <input type="checkbox"/> <b>Non-Member \$925</b>  <b>Intensive Format</b> <input type="checkbox"/> <b>FNHMA Member \$2,300</b> <input type="checkbox"/> <b>Non-Member \$2,475</b>		<input type="checkbox"/> <b>100 – Health Issues and Systems</b> <input type="checkbox"/> <b>200 – Leadership and Strategy</b> <input type="checkbox"/> <b>300 - Health Management Services 1</b> <input type="checkbox"/> <b>400 - Health Management Services 2</b> <input type="checkbox"/> <b>500 - Professionalism, Ethics and Cultural Awareness</b>		<input type="checkbox"/> <b>Spring (May 14, 2018)</b> <input type="checkbox"/> <b>Fall (September 11, 2017)</b> <input type="checkbox"/> <b>Winter (January 22, 2018)</b>	
<b>Total Course Fee with taxes included:</b>					
<i>Tax is based on your province of residence. Please select one (GST/HST# 811344852):</i>					
<input type="checkbox"/> QC, AB, SK, MB, BC, NWT, NV, YK (with 5% GST added)\$		<input type="checkbox"/> PEI, (with 14% HST added)		\$	
<input type="checkbox"/> ON, NB, NFLD, (with 13% HST added)		<input type="checkbox"/> GST/HST exempt (no tax added)*		\$	
<input type="checkbox"/> NS, (with 15% HST added)		<i>* Please include proof of tax exemption at time of application (A letter of exemption from your employer and/or a copy of your status card – you must have an on-reserve mailing address)</i>			
<input type="checkbox"/> <b>I have enclosed a cheque payable to “FNHMA”</b>					
<b>Card Number:</b>			<b>Expiry Date:</b>	<b>Cardholder Signature:</b>	
			/		
<b>Name on Card:</b>				<b>Amount Paid:</b>	
<p><b>Registration deadline is 5 days before the term start date. Payment must be received prior to the course start date. Participants may cancel and receive a refund minus a \$100 administration fee up to 10 days after the course start date. Refunds will not be available more than 10 days into the course. I have read and understand the aforementioned policies:</b></p>					
<b>Signature:</b>				<b>Date:</b>	

Mail: 325 Island Road, Unit 3, Akwesasne, ON, K6H 5R7  
 Toll Free: 1-844-218-0440  
 Phone: 613-599-6070 Fax: 613-319-8092  
 Email: info@fnhma.ca  
 Website: www.fnhma.ca