December 2020 IPEC Institute Registration

Building a Framework for IPE for Collaborative Practice
Virtual – December 1, 3, 8 and 10, 2020

For more institute details, click here.

Please note that registrations cannot be processed until full payment has been received. All fields below must be completed in its entirety.

REGISTRATION INFORMATION

Please enter your details as you would like them published in the participant list.

Are you an IPEC member? *

- Yes, I am a member of one of the IPEC associations.
- No, I am not a member of one of the IPEC associations.

Please Select One: *

- I do not have any team members. I am a single participant.
- I am part of a team.

Participant *

First

Last

Title *

Credentials *

Institution Name

(Please do not
Subject area in relation to your participation to this institute *

Work Address *

Street Address

Address Line 2

City

State / Province / Region

Postal / Zip Code

Country

Phone Number *

### - ### - ####

Association Affiliation *

E-mail Address *

Additional Notification E-mail Address

Your Name (if completing this form for someone else) First Last

LEVEL OF IPECP EXPERIENCE
How would you describe you/your team in relation to your implementation of interprofessional education for collaborative practice (IPECP) content? (check one)

Select a Choice •
- I/we have zero experience with IPECP.
- I/we have begun organizing ourselves, but have yet to initiate any IPECP activities.
- I/we have some initial experience with IPECP, but no lessons learned to share yet.
- I/we have had some success with IPECP and would like to learn more as well as share our experiences with others at the institute.

INDIVIDUAL NAME / TEAM NAME
Provide an individual/team name (creativity is encouraged).

Your Individual / Team Name •

IPECP PROJECT
Each team, or individual if participating without a team, is expected to work on an IPECP project at the sponsoring institution during the institute.

Provide a brief description of the IPECP project you/your team intends to work on at the institute.

Project Title •
TUITION FEE

MEMBER Individual Program Pricing,
Super Early Bird: $450 (By September 4)
Early Bird: $550 (By October 2)
Regular: $650 (After October 2)

NON-MEMBER Individual Program Pricing
Super Early Bird: $650 (By September 4)
Early Bird: $750 (By October 2)
Regular: $850 (After October 2)

PAYMENT

Please make sure that your credit card limit is sufficient before selecting to submit. Your transaction might be declined without prior notice to your purchasing department.

Type of Payment *
- Credit Card (Visa, MasterCard, Discover or American Express)
- Check

Select Your Pricing (Super Early Bird)

Please be sure that you have provided all the necessary information before selecting the submit button.