



Texas Hospital
Association Foundation

WEBINAR REGISTRATION FORM

2026 CMS Hospital Conditions of Participation

ELEVEN-PART SERIES

Week 1 – March 24, March 26 | Noon-1 p.m. Central
Week 2 – March 31, April 2 | Noon-1 p.m. Central
Week 3 – April 7, April 9 | Noon-1 p.m. Central
Week 4 – April 14, April 16 | Noon-1 p.m. Central
Week 5 – April 21, April 23 | Noon-1 p.m. Central
Week 6 – April 28 | Noon-1 p.m. Central

REGISTRATION FEE:

	Member	Non-member	
Price for Entire Series	<input type="checkbox"/> \$1,075	<input type="checkbox"/> \$1,300	Subtotal \$ _____
			Total \$ _____

This registration rate allows unlimited attendees from your facility. This rate is not applicable to unlimited attendees across a hospital system. We want to ensure that our education is accessible to everyone, please contact us if you have any questions at servicecenter@tha.org or 512/465-1057. A recording of this program is also included in the cost of registration.

REGISTRANT INFORMATION – Please include all information requested.

Registration is final when payment is received.

Name	<input type="text"/>	<input type="checkbox"/> If paying by ACH or Check
Title	<input type="text"/>	<input type="checkbox"/> If paying by credit card, please provide the following
Department	<input type="text"/>	information to receive the secure payment link
Organization	<input type="text"/>	Name <input type="text"/>
Address	<input type="text"/>	Title <input type="text"/>
City/State/ZIP	<input type="text"/>	Email Address <input type="text"/>
Phone (area code)	<input type="text"/>	Phone (area code) <input type="text"/>
Fax (area code)	<input type="text"/>	Signature <input type="text"/>
Email	<input type="text"/>	

ONLINE

www.tha.org

MAIL

Texas Hospital Association
P.O. Box 2756
San Antonio, TX 78299

REMIT PAYMENT BY ACH

Texas Hospital Association
Account No. 592313707
ACH or Transit Routing #114000093

EMAIL

servicecenter@tha.org

CANCELLATIONS AND SUBSTITUTIONS

Registrants unable to attend may allow an alternate to connect. Transfer from one THA education program to another is not permitted, and no financial credit will be granted. If a registrant cancels, the registration fee, less a 20 percent service charge, is refundable only if THA receives notice in writing no less than five business days prior to the program. (Send notification via e-mail to registrar@tha.org or fax to 512/692-2653). Refunds will be issued only after the program runs and it is verified that the registrant did not access the program.