



HEALTHCARE CONFERENCE

May 29 – June 1, 2008

San Diego Marriott Hotel & Marina • San Diego, California

Dear CAPG Member:

You and your staff are invited to the 2008 CAPG Healthcare Conference—the most valuable educational and networking event for those of us engaged in coordinated healthcare. This conference offers a comprehensive program of nationally acclaimed speakers, educational sessions, networking opportunities and just plain fun. We encourage you to provide this opportunity to as many of your physicians, management team and key staff members as possible. We're confident you will find it a valuable investment.

This year's conference will be presented at the conveniently located San Diego Marriott Hotel & Marina. The hotel offers ideal facilities for group retreats and strategic planning meetings. Once again, we will be happy to help you arrange private meetings for your group during specific times before and after the conference. For more information, please call Nelson Maldonado at 213-239-5041.

The emphasis at this conference is on keeping our members up-to-date on timely clinical and management developments. Our general session speakers—former Senate Majority Leader George Mitchell, futurist Ian Morrison, and accountable healthcare expert Jay Crosson—will present the broader view. Our three sets of breakout sessions will cover many of the important issues you encounter every day, ranging from Medicare Advantage and Pay-for-Performance to care management and telemedicine. And, for a true exchange of ideas, we will again offer our popular roundtable discussions.

Because this conference is so important to our members, we are offering discounts for multiple registrations. When you register 11 or more participants at the same time, you will save \$50 per person. All participants are invited to bring their families and enjoy the outstanding waterfront facilities at the Marriott Hotel & Marina.

Please review the enclosed materials and send in your registration forms for the conference and golf event soon. Room reservations must be received by the hotel by May 2 to qualify for the special CAPG rate. We look forward to seeing you and your colleagues at the 2008 Healthcare Conference.

Sincerely,

Donald H. Crane
President and CEO

GETTING THE MOST FROM THE 2008 CAPG HEALTHCARE CONFERENCE:

*Register multiple
physicians and staff
members to receive
greater value and
discounted rates.*

*Let us help you arrange a
strategic planning
meeting or staff retreat in
conjunction with the
CAPG Conference.*

*Find out about the newest
products and services
offered by our sponsors
and exhibitors during our
Friday night beach-
themed Exhibit Fair and
Strolling Dinner.*

ORGANIZATION INFORMATION

Organization Name _____

Mailing Address _____

City/ST/ZIP _____

Contact Person's Name/Title _____

Telephone _____ Fax _____

E-mail Address _____

REGISTRATION FEES

CAPG Members:

Registered by April 14, 2008 \$800 each

Registered after April 14, 2008 \$875 each

11 or more \$50 discount on fees noted above

CAPG Corporate Partners \$995 each

CAPG Associate Partners \$1,095 each

CAPG Affiliate Partners \$1,195 each

Non-Contributor, Non-Member Attendee \$1,975 each

Government Employees \$1,195 each

CHA Members \$995 each

Spouse/Adult Guest Full-Conference Attendees \$355 each

Spouse/Adult Guest Friday or Saturday Pass \$275 each

Babysitting & Youth/Teen Programs (per session) \$50 per child

Golf Tournament Participants: Members/Partners \$185 per player

Golf Tournament Participants: Non-Members \$225 per player

Sponsor Registration Fees See Sponsor Brochure

Hotel Room \$225 per night, excluding taxes, **register directly with the Marriott.** See below for details.

SPECIAL PROGRAM INFORMATION

Babysitting: Ages 6 months–3 years (\$50 per child/per session; includes meals.)

Session 1: Friday, 8:30 a.m. – 3:00 p.m. **Session 2:** Friday, 6:30 p.m. – 10:00 p.m. **Session 3:** Saturday, 8:30 a.m. – 1:30 p.m.

Session 4: Saturday, 6:30 p.m. – 11:00 p.m.

Youth Program: Ages 4–11 (\$50 per child/per session; includes meals.)

Session 1: Friday, 8:30 a.m. – 3:00 p.m. **Session 2:** Friday, 6:30 p.m. – 10:00 p.m. **Session 3:** Saturday, 8:30 a.m. – 1:30 p.m.

Session 4: Saturday, 6:30 p.m. – 11:00 p.m.

Teen Program: Ages 12–16 (\$50 per child/per session; includes meals.)

Session 2: Friday, 6:30 p.m. – 10:00 p.m. **Session 4:** Saturday, 6:30 p.m. – 11:00 p.m.

Golf Tournament at the Maderas Golf Club: \$185 per player member/partners; \$225 per player non-members. Includes green and cart fees, lunch and tournament. Open to full-Conference attendees only. No refunds; player substitutions OK. Thursday, May 29, 10:30 a.m. registration—shotgun start at 11:30 a.m. Information on shuttle service, pairing and tournament details will be e-mailed prior to the conference.

HOTEL ACCOMMODATIONS (NEW)

(Please see General Information on page 5 of brochure for details.)

New this year—hotel accommodations must be made directly with the hotel. A special rate of \$225 plus taxes per room, single or double occupancy, has been arranged for this conference at the San Diego Marriott Hotel & Marina. **Hotel rooms are available on a first-come-first-serve basis; please reserve your space early as rooms fill up fast.** The CAPG special rate can only be guaranteed up to **May 2, 2008** pending availability. To make your reservations, please contact the San Diego Marriott Hotel & Marina at 619-234-1500 and ask for the CAPG Healthcare Conference group rate. Or visit our conference page at www.capg.org and use the Marriott link provided.

THIRD PARTY BILLING

The Marriott Hotel requires that a Third Party Billing Request form be completed if you wish to charge multiple rooms to a single corporate or personal credit card or if the name of the occupant differs from the name on the credit card. Though you may reserve any number of rooms with one credit card, the payment for those rooms will be charged to the occupant unless the Marriott has the Third Party Billing Request form, along with required identification, on file. To request a Third Party Billing form, please contact the San Diego Marriott Hotel & Marina at 619-234-1500. Or download online at www.capg.org.

Register online today at www.capg.org

CONFERENCE REGISTRATION

Please print legibly or type; make copies of this form for additional registrations. Please provide a **unique e-mail address** for each registrant.

Registrant 1: _____ **E-mail:** _____ **Fee:** \$ _____

Golf Tournament Fee: \$ _____

Spouse/Guest: _____

Full Conference Friday Only Saturday Only Golf Tournament Fee: \$ _____

Child 1 (full name): _____ **Age:** _____

Session 1 Session 2 Session 3 Session 4 Fee: \$ _____

Child 2 (full name): _____ **Age:** _____

Session 1 Session 2 Session 3 Session 4 Fee: \$ _____

Child 3 (full name): _____ **Age:** _____

Session 1 Session 2 Session 3 Session 4 Fee: \$ _____

Registrant 2: _____ **E-mail:** _____ **Fee:** \$ _____

Golf Tournament Fee: \$ _____

Spouse/Guest: _____

Full Conference Friday Only Saturday Only Golf Tournament Fee: \$ _____

Child 1 (full name): _____ **Age:** _____

Session 1 Session 2 Session 3 Session 4 Fee: \$ _____

Child 2 (full name): _____ **Age:** _____

Session 1 Session 2 Session 3 Session 4 Fee: \$ _____

Child 3 (full name): _____ **Age:** _____

Session 1 Session 2 Session 3 Session 4 Fee: \$ _____

Registrant 3: _____ **E-mail:** _____ **Fee:** \$ _____

Golf Tournament Fee: \$ _____

Spouse/Guest: _____

Full Conference Friday Only Saturday Only Golf Tournament Fee: \$ _____

Child 1 (full name): _____ **Age:** _____

Session 1 Session 2 Session 3 Session 4 Fee: \$ _____

Child 2 (full name): _____ **Age:** _____

Session 1 Session 2 Session 3 Session 4 Fee: \$ _____

Child 3 (full name): _____ **Age:** _____

Session 1 Session 2 Session 3 Session 4 Fee: \$ _____

(Registration continues on back)

Registrant 4: _____ E-mail: _____ Fee: \$ _____

Golf Tournament Fee: \$ _____

Spouse/Guest: _____

Full Conference Friday Only Saturday Only Golf Tournament Fee: \$ _____

Child 1 (full name): _____ Age: _____

Session 1 Session 2 Session 3 Session 4 Fee: \$ _____

Child 2 (full name): _____ Age: _____

Session 1 Session 2 Session 3 Session 4 Fee: \$ _____

Child 3 (full name): _____ Age: _____

Session 1 Session 2 Session 3 Session 4 Fee: \$ _____

CALCULATE YOUR FEES

Conference Registrants (see page B for fee structure) \$ _____

Spouse/Adult Guest Full-Conference Attendees (\$355 each; includes all meals) \$ _____

Spouse/Adult Guest Friday or Saturday Pass (\$275 each; includes all meals for the one day) \$ _____

Babysitting Registrants (\$50 per session/per child; includes meals) \$ _____

Youth Program Registrants (\$50 per session/per child; includes meals) \$ _____

Teen Program Registrants (\$50 per session/per child; includes meals) \$ _____

Golf Tournament Registrants (Thursday, May 29; \$185 per player members/partners; \$225 non-members) \$ _____

REGISTRATION FEE TOTAL \$ _____

PAYMENT

Check/Money Order (make payable to CAPG) American Express MasterCard VISA

Credit Card Number _____ Exp. Date _____ Card ID#* _____

Name on Card _____ Signature _____

Billing Address _____

City/ST/ZIP _____

**For Visa and MasterCard, the Card ID Number is the 3-digit number located on the back of your card, usually at the top of the signature strip. For American Express it is the 4-digit number printed on the front of your card.*

For advance registration please send all completed forms by MAY 15, 2008 to:

**Conference Registration, c/o CAPG 2008 Healthcare Conference
465 Forbes Blvd., South San Francisco, CA 94080**

Or fax to 888-463-9278

Or register online at www.capg.org

Questions? Call 800-242-1036 or e-mail capg@amotive.com

Registrations received after May 15 will be processed onsite and may delay check-in.

