



**Wisconsin Homecare Organization (WHO)
Exam Registration Form**

For the

HOME CARE CODING SPECIALIST (HCS-D) EXAMINATION

Register me for the Home Care Coding Specialist - Diagnosis (HCS-D) certification examination on Oct 13, 2010.

_____ I am a WHO member. My registration fee is \$229.00

_____ I am not a WHO member. The standard registration fee is \$249.00

Register me for the Home Care Coding Specialist - Diagnosis (HCS-D) Recertification examination on Oct 13, 2010. **(Open to HCS-D credential holders due for recertification)**

The standard registration fee is \$129.00 (there is no discount available for WHO membership)

I prefer to take the HCS-D exam at my office location after the conference. I understand that I must submit a Proctor Nomination Form and agree to follow the BMSC Individual Proctoring Protocol (IPP). *Forms may be downloaded at: <http://www.medicalspecialtycoding.com/homecare/downloads-forms.html>.*

CANDIDATE INFORMATION (PLEASE PRINT OR TYPE)

Name: _____ Title: _____

Organization: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) _____ Fax: (____) _____ Email: _____

(For exam information)

PAYMENT INFORMATION

Credit Card VISA MC AMEX

Card #: _____ Expiration _____

Cardholder: _____ Signature _____

Check enclosed Payable to Registrar, BMSC (TIN 52-2205881)

Fax (301) 287-2914 ▪ Call (800) 897-4509
▪ **Mail ATTN REGISTRAR BMSC, 9737 Washingtonian Blvd, Ste 100 Gaithersburg, MD 20878**