

**SPEAKER REGISTRATION FORM**

Updates in Correctional Health Care • April 24-27, 2010

Name \_\_\_\_\_ Degree \_\_\_\_\_  CCHP  CCHP-A

Institution, Company or Affiliation (As you wish it to appear on your badge) \_\_\_\_\_ Professional Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

**REGISTRATION**

## Speaker Rate

Speaker Registration Fee (**Submit by March 1**)  \$190 \$ \_\_\_\_\_**PRECONFERENCE SEMINARS****Saturday, April 24** (9 am – 5 pm)An In-Depth Look at NCCHC's New Standards  \$185 \$ \_\_\_\_\_ Jail/PrisonCCHP-RN Certification review Course  \$185 \$ \_\_\_\_\_Preparing Your Facility for a Pandemic: Tips and Tools for an Effective Response (**1:30 - 5 pm**)  \$99 \$ \_\_\_\_\_**Sunday, April 25**Pain Management: A Multidisciplinary Approach (**8 – 11:30 am**)  \$99 \$ \_\_\_\_\_Assessment and Treatment of Suicide Risk & Self-injurious Behaviors (**8 – 11:30 am**)  \$99 \$ \_\_\_\_\_Advanced Nursing Assessment for Triage and Health Assessment (**1 – 4:30 pm**)  \$99 \$ \_\_\_\_\_Achieving Quality Care in Tough Economy (**1 – 4:30 pm**)  \$99 \$ \_\_\_\_\_Rising Prevalence of Dementia in Inmate Populations (**1 – 4:30 pm**)  Free \$ \_\_\_\_\_**Billing Fee (if applicable)**  \$30 \$ \_\_\_\_\_**Total Enclosed** \$ \_\_\_\_\_**PAYMENT** FEIN: 36-3221830 MasterCard  VISA  American Express  Check Enclosed Payable to NCCHC

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_

Billing address if different from above

 Please invoice my facility. \*\* Purchase orders accepted only from governmental agencies and their contractors. Purchase order must accompany registration form. There is a \$30 service charge for invoice processing.**Office Use**National Commission on Correctional Health Care  
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