REGISTRATION FORM: 2018 Southwest Region Fall SNANC Meeting November 16, 2018 8:00 a.m. - 2:00 p.m.

McLindon's at Brushy Mountain Golf Club 300 Golf Course Lane Taylorsville, NC 28681

Last name:	First name:	
Street:	City/State:	Zip:
Daytime phone number:		
Email address:		
School District where you work:		
SNANC Members: \$35	Non-SNANC members: \$55	
Payment Method: Cash Check	Check #:	
Amount Enclosed: \$		

Please make checks out to: Southwest Region SNANC

Mail to: M.Costello C/O Alexander Central High School

223 School Drive Taylorsville, NC 28681

You will receive an email confirmation once your payment and registration have been received.

Cancellation Policy:

Registration Information

Refunds will only be offered for cancellations received on or before November 8th Cancellations: fax (828)-632-5387 or email to mcostello@alexander.kl2.nc.us
Substitutes are welcome (please notify us in advance of the program)

Disclosures:

- To receive contact hours nurses must attend 100% of this activity
- No participants in the providing of this activity, the speakers or the members of the planning committee, have any conflicts of interest related to the content of this activity
- Corporate sponsorship: none

