

# **GNHAMA Fall Conference**

Oregon Gardens  
879 West Main St  
Silverton, OR 97381

## **October 25 & 26, 2012**

Please mail your registration form and payment payable to "GNHAMA"

JOAN WILD  
GNHAMA TREASURER  
10411 NE 21st Ct  
Vancouver, WA 98686

Name of Attendee: \_\_\_\_\_

Facility Representing: \_\_\_\_\_

Title: \_\_\_\_\_

Work Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail address \_\_\_\_\_

### **Check one of the below:**

- GNHAMA member registration \$250.00 (\$200.00 conference registration discounted for existing members plus \$50.00 for yearly membership)
- Non-member registration with new membership \$300.00 (\$250.00 conference registration plus \$50.00 for yearly membership)
- Non-member registration without membership \$250.00 (\$250.00 conference Registration)
- I will attend - CHAM / CHAA study session
- I will attend - CHAM / CHAA testing session

For questions please contact: Kara Rowe [kara.rowe@bayareahospital.org](mailto:kara.rowe@bayareahospital.org) or Susan Pincock [susanp@mcmc.net](mailto:susanp@mcmc.net)