



23rd ANNUAL SYMPOSIUM
Updates for Clinical and Legal Practice
ATTENDEE REGISTRATION

Date: Tuesday, October 15, 2019 Time: 8:00AM - 4:30PM
Location: The Hotel & Conference Center at Mohegan Sun Cost: \$55.00
1280 Highway 315, Wilkes-Barre, PA 18702

REGISTRATION DEADLINE: Monday, October 7, 2019 (guaranteed when payment received)

Registration form fields: Company Name, Attendee Name, Title, Address, City/State/Zip Code, Phone, Fax, E-mail, CREDITS (Nursing Contact Hours, CCM, CDMS, CRC, CLE), OPTIONAL CREDIT (Nursing Contact Hours, CCM, CDMS, CRC, CLE)

REQUEST FOR SPECIAL ACCOMMODATIONS:

Disability requiring special services Special dietary needs Explain:

PAYMENT: *Refunds will be issued up to 2 weeks before the symposium (less a \$10.00 cancellation fee per individual).

CHECK ENCLOSED

Please make checks payable to: Northeastern Rehabilitation Associates, P.C.

Attn: Bill Dempsey, 5 Morgan Highway, Suite 4, Scranton, PA 18508

CREDIT CARD PAYMENT:

Email or Fax completed form to wdempsey@nerehab.com or 570-969-9280 (Attn: Bill Dempsey)

Name on Card:

Card Billing Address: Zip:

Card #: CVV#: Visa MC DISC

Exp. Date: Signature:

PAYPAL PAYMENT (PROCESSED ON OUR WEBSITE: WWW.NEREHAB.COM)

Question: Please contact Bill Dempsey at wdempsey@nerehab.com or 570-344-3788 ext. 320

For office use only: GM/Date: EXCEL/Date: CONF Email/Date: ETHICS CREDIT OPTION