

# SYMPOSIUM REGISTRATION FORM



Pre-Symposium Sessions <i>(Free with any paid registration)</i>			
Date	Session	Time	Code/Choice
<b>Tuesday, July 16</b>	Rocky Mountain Retreat <i>(\$275 fee)</i>	9:00 am – 4:30 pm	<input type="checkbox"/> Pre 1 <i>(\$275 fee)</i>
<b>Wednesday July 17</b>	Rocky Mountain Retreat <i>(continued)</i>	8:30 am – 12:15 pm	<i>(Included and required with Pre 1)</i>
	Educational Session	10:30 am – 12:00 pm	<input type="checkbox"/> Pre 2
	Educational Sessions	1:30 pm – 3:30 pm	<input type="checkbox"/> Pre 3 <input type="checkbox"/> Pre 4
	Educational Sessions	3:45 pm – 4:45 pm	<input type="checkbox"/> Pre 5 <input type="checkbox"/> Pre 6
	Educational Sessions	5:00 pm – 6:00 pm	<input type="checkbox"/> Pre 7 <input type="checkbox"/> Pre 8
	Dinner Session <i>(\$30 fee)</i>	6:15 pm – 7:45 pm	<input type="checkbox"/> Pre 9 <i>(\$30 fee)</i>
Symposium Sessions			
<b>Thursday July 18</b>	Educational Sessions	8:00 am – 9:30 am	<input type="checkbox"/> A1 <input type="checkbox"/> A2 <input type="checkbox"/> A3 <input type="checkbox"/> A4 <input type="checkbox"/> A5 <input type="checkbox"/> A6
	Keynote Address & Awards Ceremony	10:00 am – 11:15 am	<input type="checkbox"/> KN
	Luncheon Sessions <i>(Non-certified)</i>	11:30 am – 1:00 pm	<input type="checkbox"/> SS2* <input type="checkbox"/> SS3* <input type="checkbox"/> SS4* <i>(Non-certified)</i>
	Educational Sessions	1:30 pm – 3:00 pm	<input type="checkbox"/> B1 <input type="checkbox"/> B2 <input type="checkbox"/> B3 <input type="checkbox"/> B4 <input type="checkbox"/> B5 <input type="checkbox"/> B6
	Educational Session	3:30 pm – 5:00 pm	<input type="checkbox"/> C1 <input type="checkbox"/> C2 <input type="checkbox"/> C3 <input type="checkbox"/> C4 <input type="checkbox"/> C5 <input type="checkbox"/> C6
<b>Friday July 19</b>	“Walk & Talk” Around the Lake <i>(Non-certified)</i>	7:15 am – 7:45 am	<input type="checkbox"/> WT1 <i>(Non-certified)</i>
	Educational Sessions	8:00 am – 9:30 am	<input type="checkbox"/> D1 <input type="checkbox"/> D2 <input type="checkbox"/> D3 <input type="checkbox"/> D4 <input type="checkbox"/> D5 <input type="checkbox"/> D6 <input type="checkbox"/> D7
	Educational Sessions	10:00 am – 11:30 am	<input type="checkbox"/> E1 <input type="checkbox"/> E2 <input type="checkbox"/> E3 <input type="checkbox"/> E4 <input type="checkbox"/> E5 <input type="checkbox"/> E6 <input type="checkbox"/> E7
	Ethics Forum	12:15 pm – 1:45 pm	<input type="checkbox"/> EF
	Educational Session	2:00 pm – 3:00 pm	<input type="checkbox"/> F1
	Workshops <i>(\$95 fee)</i>	3:15 pm – 6:15 pm	<i>Indicate 1st &amp; 2nd choices if applicable. (\$95 fee per Workshop)</i> ___ <input type="checkbox"/> WS1 ___ <input type="checkbox"/> WS2 ___ <input type="checkbox"/> WS3
	Educational Session	3:15 pm – 4:45 pm	<input type="checkbox"/> G1
	Educational Sessions	5:30 pm – 6:15 pm	<input type="checkbox"/> H1 <input type="checkbox"/> H2 <input type="checkbox"/> H3 <input type="checkbox"/> H4 <input type="checkbox"/> H5
Dinner Session <i>(\$30 fee)</i>	6:30 pm – 8:00 pm	<input type="checkbox"/> J1 <i>(\$30 fee)</i>	
<b>Saturday July 20</b>	Breakfast Session <i>(Non-certified)</i>	7:30 am – 8:45 am	<input type="checkbox"/> SS8* <i>(Non-certified)</i>
	Workshops <i>(\$95 fee)</i>	7:30 am – 10:30 am	<i>Indicate 1st &amp; 2nd choices if applicable. (\$95 fee per Workshop)</i> ___ <input type="checkbox"/> WS4 (beginner) ___ <input type="checkbox"/> WS4 (intermediate) ___ <input type="checkbox"/> WS4 (advanced) ___ <input type="checkbox"/> WS5 ___ <input type="checkbox"/> WS6 ___ <input type="checkbox"/> WS7
	Educational Sessions	9:00 am – 10:30 am	<input type="checkbox"/> L1 <input type="checkbox"/> L2 <input type="checkbox"/> L3
	Educational Sessions	12:00 pm – 1:00 pm	<input type="checkbox"/> M1 <input type="checkbox"/> M2 <input type="checkbox"/> M3 <input type="checkbox"/> M4 <input type="checkbox"/> M5 <input type="checkbox"/> M6
	Educational Sessions	1:30 pm – 3:00 pm	<input type="checkbox"/> N1 <input type="checkbox"/> N2 <input type="checkbox"/> N3 <input type="checkbox"/> N4 <input type="checkbox"/> N5 <input type="checkbox"/> N6 <input type="checkbox"/> N7
	Educational Sessions	3:30 pm – 5:00 pm	<input type="checkbox"/> O1 <input type="checkbox"/> O2 <input type="checkbox"/> O3 <input type="checkbox"/> O4 <input type="checkbox"/> O5 <input type="checkbox"/> O6
<b>Sunday July 21</b>	Home “Stretch” <i>(Non-certified)</i>	7:00 am – 7:30 am	<input type="checkbox"/> HS <i>(Non-certified)</i>
	Educational Sessions	8:00 am – 9:30 am	<input type="checkbox"/> P1 <input type="checkbox"/> P2 <input type="checkbox"/> P3 <input type="checkbox"/> P4 <input type="checkbox"/> P5
	Educational Sessions	9:45 am – 10:45 am	<input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4 <input type="checkbox"/> Q5
	Educational Seminar	9:45 am – 2:30 pm	<input type="checkbox"/> R1a <input type="checkbox"/> R1b

\* Verification of clinician's practice and eligibility information may be provided to sponsor for auditing purposes.

# SYMPOSIUM REGISTRATION FORM



**Certain information will appear on your name badge. Please print clearly.**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Specialty: \_\_\_\_\_

E-mail: \_\_\_\_\_ Employer: \_\_\_\_\_

Preferred Postal Mailing Address: \_\_\_\_\_

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

Contact Phone or Cell: \_\_\_\_\_ Advanced Practice License # \_\_\_\_\_

From which School did you receive your Advanced Practice education? \_\_\_\_\_ Year graduated? \_\_\_\_\_

Please indicate if you have dietary restrictions\*, a need for auxiliary aids or special assistance services **(notification required by June 18, 2019)** \_\_\_\_\_

\*Dietary restrictions will be accommodated as best possible for functions held at the Keystone Conference Center, however exceptions may apply. Please call 800-996-3233 in advance or inquire at the Symposium Help Desk onsite with questions or concerns.

Registration Fees							
FEES	<b>SAVE \$25 BY REGISTERING ONLINE</b>	Paid by Feb 15, 2019	Paid by April 15, 2019	Paid by June 15, 2019	Paid after June 15, 2019	Nursing MS Student*	TOTALS
Symposium (Thurs–Sun)		\$565	\$640	\$690	\$740	\$455	
Weekend (Fri – Sun)		\$515	\$590	\$640	\$690	\$400	
Two-Day (Thurs–Fri, Thurs & Sat, Fri–Sat, or Sat–Sun – circle applicable days)		\$500	\$500	\$500	\$550	N/A	
One-Day (Thurs, Fri, Sat, or Sun – circle applicable day)		\$300	\$300	\$300	\$350	N/A	
Optional Items							
Dinner Session (Wed and/or Fri) \$30/dinner							
Handouts Thumb Drive Service (All available handouts plus update service providing subsequent updates via e-mail) \$10							
Hardcopy Syllabus (Must pre-order by June 15, 2019, not sold on-site) \$70							
Reception Pass for Guest (Thurs) \$20 <i>(Registration includes admission to the Reception for symposium registrant. Purchase pass ONLY FOR GUEST(s) if needed.)</i>							
Rocky Mountain Retreat (Tues–Wed) \$275							
Workshop (Fri and/or Sat) \$95/workshop							
<b>TOTAL FEES</b>							

\*Spring or Summer 2019. Verification must be provided upon request.

**CREDIT CARD PAYMENTS (American Express, Discover, Mastercard, Visa accepted)**

Card # \_\_\_\_\_

Expires \_\_\_\_\_ Security code \_\_\_\_\_

Cardholder's Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_

Billing Address (if different than registration address) \_\_\_\_\_

**CHECK PAYMENTS PAYABLE TO "National Nurse Practitioner Symposium"**

**Cancellations on or before June 15, 2019 are fully refundable less a \$50 cancellation fee. Cancellations after June 15, 2019 are non-refundable, however substitutions are allowed.**

**RETURN TO:**

**National Nurse Practitioner Symposium**  
**4255 S Buckley Rd #118**  
**Aurora, CO 80013**  
**or Fax: 888-996-3296 • E-mail: info@npsymposium.com**

