



Registration Form

Oklahoma 2019 LeadingAge Oklahoma Annual Conference / March 12-13, 2019

Name _____ Title _____

Please print for correct name on name tag. Each applicant must complete a separate registration form.

Facility _____

Address _____

City _____ State _____ Zip _____

Adm. License No. _____ NAB ID No. _____ Email _____

Onsite Emergency Contact: Name, phone number _____

REGISTRATION: Providers, LTC Professionals, Students

Mark the seminars you wish to attend. Check the box for CEU credit requested.

March 12	Up to Feb. 19	After Feb. 19
Long Term Care Administration	\$160 _____	\$185 _____
<input type="checkbox"/> 6 Hr CEU for Nursing Home Adm.		
<input type="checkbox"/> 6 Hr CEU Nursing		
<input type="checkbox"/> 6 Hr CEU for Home Care		
Assisted Living	\$160 _____	\$185 _____
<input type="checkbox"/> 6 Hr CEU for Assisted Living		
<input type="checkbox"/> 6 Hr CEU for Residential Care		
Adult Day	\$160 _____	\$185 _____
<input type="checkbox"/> 6 Hr CEU for Adult Day Services		
Housing	\$120 _____	\$145 _____
Social Services	\$120 _____	\$145 _____
Activities for Independent Living	\$120 _____	\$145 _____

March 13	Up to Feb. 19	After Feb. 19
Long Term Care Administration	\$160 _____	\$185 _____
<input type="checkbox"/> 6 Hr CEU for Nursing Home Admin		
<input type="checkbox"/> 6 Hr for Residential Care		
<input type="checkbox"/> 6 Hr for Assisted Living		
<input type="checkbox"/> 6 Hr for Adult Day Services		
Dining Services	\$160 _____	\$185 _____
<input type="checkbox"/> 6 Hr CEU for Dietary Managers		
Home Care	\$160 _____	\$185 _____
<input type="checkbox"/> 6 Hr CEU for Home Care Adm.		
Nursing	\$160 _____	\$185 _____
<input type="checkbox"/> 6 Hr CEU for Nursing Services		
Activity Directors	\$120 _____	\$145 _____
Environmental Services	\$120 _____	\$145 _____

Day 1 Total \$ _____

Day 2 Total \$ _____

<input type="checkbox"/> Passport – March 12-13	Up to Feb. 19	After Feb. 19
Mark sessions and CEUs above. See page 9 for details	\$375 _____	\$425 _____

REGISTRATION: Business Partners

Mark sessions and CEUs above	Up to Feb. 19	After Feb 19
Non-Exhibiting Business Associate Member	\$425 _____	\$475 _____
Non-Exhibiting non-Business Associate Member*	\$525 _____	\$600 _____
Exhibiting Business Partners may register online at www.LeadingAgeOK.org		

LeadingAge OK Member Events

LeadingAge OK Awards Program & Member Dinner – March 12	<input type="checkbox"/> I will attend: \$20 Ticket _____
	<input type="checkbox"/> I will not attend
Transportation to Member Dinner	<input type="checkbox"/> YES <input type="checkbox"/> NO
LeadingAge OK Annual Business Meeting- March 13	<input type="checkbox"/> I will attend <input type="checkbox"/> I will not attend

Member Code: _____

Total Payment Enclosed \$ _____

Registration and Payment must be received by February 19 to avoid the late registration fee.

Mail to: LeadingAge Oklahoma, P.O. Box 1383, El Reno, OK 73036

Providing your email address gives permission for vendors to make a single, one-time contact. I do not wish to receive any special conference offers.