

Registration Form **WSNA Nurse Legislative Day '02**

Registrant Information - Separate registration form required for each registrant. Photocopy registration form as needed.

\$ _____ **Registration Fee**

\$ _____ **PAC Contribution** (Suggested donation \$25)

\$ _____ **Total Amount Enclosed**

Name _____

.Credentials.

Street Address, _____

City _____

State _____

Zip. _____

Phone _____

Legislative District. _____

. Membership #/ Last 4 SSN _____

School _____

Cost

D \$20 Pre-registered* Students

D \$50 Pre-registered* WSNA, ARNPs United, AAPPN, WANA, AORN, or SNOW Members

D \$55 Pre-registered* Non-members

D \$30 Students Who Register On-Site D

\$70 All Others Who Register On-Site

* To qualify for pre-registration prices, registration forms must be received no later than January 26th.

D Check Enclosed O

VISA/MasterCard.

Exp _____

Cardholder Name _____

.Cardholder Signature. _____

Detach here and return top portion by mail or fax to 575 Andover Park West, Suite 101, Seattle, WA 98188 or 206-575-1908

NURSE LEGISLATIVE DAY

NURSE LEGISLATIVE DAY

Date - Monday, February 2, 2009

Washington Center for Performing Arts 512
Washington Street SE, Olympia, WA

More Information - wsna.org

REMINDER CARD