

**Registration for Spring 2017 OOPNE Conference
Featuring
April 20 & 21
Embassy Suites, Dublin, Ohio**

Attendee Name: (Please Print)		
School Name:		
School Address:		
Home Address:		
School Phone:		
E-mail:		
I permit OOPNE to use my personal info in an OOPNE directory		<input type="checkbox"/> Yes <input type="checkbox"/> No
Please indicate if this is your first OOPNE Conference:		<input type="checkbox"/> Yes <input type="checkbox"/> No
Please indicate if you are a new OOPNE member:		<input type="checkbox"/> Yes <input type="checkbox"/> No
Director/Coordinator	<input type="checkbox"/>	Faculty
	<input type="checkbox"/>	<input type="checkbox"/>

Please use one form for each person

Please complete the form in its entirety / legibly

This program is offered by the Ohio Organization of Practical Nurse educators (OOPNE).

Contact hours will be awarded to the participant upon satisfactorily completing the offering. You may contact Alicia Warren at awarren@wscc.edu for further information.

Registration Fees:

- _____ \$200.00 Day 1
- _____ \$150.00 Day 2
- _____ \$325.00 Both Days

Please return registration and payment by **March 25, 2017** to: Purchase order number will be accepted without payment by due date. **ALL REGISTRATIONS MUST BE RECEIVED BY DUE DATE.**

Alicia Warren

PO Box 49

Dexter City, Ohio 45727

Note: No walk-ins will be accepted. **There will be no late registrations accepted.** No refunds will be awarded after April 1, 2017.

Direct any questions concerning payment to Alicia Warren: 740-885-5698.

Make checks payable to **OOPNE**. There will be a \$50.00 fee for returned checks.

****Don't forget to make plans to donate a basket** for the scholarship basket raffle. Please email Sheri Barker at sbarker1@wscc.edu to let her know the theme of the basket that you are bringing! Thanks for your support; this is always a FUN event at the conference!

