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Janet Napolitano
Governor

Joey Ridenour
Executive Director

Arizona State Board of Nursing

ARIZONA NURSE PRACTITIONER SUMMIT
MAINTAINING SCOPE - EXPANDING COMPETENCIES
September 29, 2006

REGISTRATION FORM
(Please use one form per registrant.)

Select One:

Check Box	☐ Student Registration:	$45 per person
Check Box	☐ General Registration:	$60.00 per person prior to September 1, 2006
Check Box	☐ Late Registration:	$75.00 per person after September 1, 2006
Check Box	☐ On-site/Walk-in Registration:	$100.00 per person On-site/Walk-in Registration

Fees include continental breakfast and lunch.

Purchase Orders WILL NOT be accepted in lieu of payment.
Submit completed form and check or money order made payable to Arizona State Board of Nursing, 4747 North 7th Street, Ste 200, Phoenix, Arizona 85014-3653, Attn: NP Summit 2006

Name: _____

Facility/School/Affiliation: _____

Address: _____

City, State, Zip: _____

E-Mail Address: _____

Business Phone: _____ Mobile Phone: _____ Fax: _____

To avoid any delays in the registration process, please type or print legibly.

Refunds will be issued only in the event the conference is canceled.

For further information, contact our office at 602-889-5182, 602-889-5187 or via e-mail at kgrady@azbn.gov, kgilliland@azbn.gov.