



YAKIMA CHAPTER -REGISTRATION FORM

Western Region of SUNA's Annual Conference

Big Island, Hawaii, October 25-27, 2010

Hilton Waikoloa Village Hotel

Name _____ Badge first-name _____

Institution _____

Address _____

City _____ State/Prov. _____ Zip _____

Country _____ TEL: _____ FAX: _____

Email _____ Staying at Hilton Waikoloa? ____Y ____N____

Professional License#: _____ SUNA ID# _____

Category	Price	Quantity	Fees
A. Registration fee for SUNA Members & Guests	\$180	_____	\$ _____
C. Sunday (Oct.24) President's Oceanside Welcome Reception, 6:30pm	\$75	_____	\$ _____
D. Thursday (Oct. 28) Under the Moon Seaside Reception, 6:30 pm	\$75	_____	\$ _____
Total Registration Fees			\$ _____

PAYMENT: Please mail this form with payment

Payable to: Yakima Valley Chapter SUNA

Mail to: Trish Bowman, 326 Mahre Road, Yakima, WA 98908

Your cancelled check is your receipt.

Fee must be received by 10/1/10. No refunds after 10/11/10.

There will be a \$10 processing fee for refunds.

Program Overview

Our three-day program offers healthcare workers a variety of educational and networking opportunities. Participants will return home empowered with knowledge. Our meeting is held in conjunction with the Western Section American Urological Association. We are generously welcomed by the WSAUA to attend their sessions and exhibits, Sunday evening's Welcome Reception at a discounted rate, symposia lunches and the exhibit hall functions.

Hotel and Information

Visit www.wsaua.org, click on 2010 Hawaii meeting for hotel room reservations, schedules, etc.

Contact Hour Credit

This activity has been submitted to the Society of Urological Nurses and Associates (SUNA) for approval to award **10 Contact Hours**. SUNA is an accredited provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

Questions

Please email or call Julie Wells or Cindie Neufeld @ jwells@yua.com, cneufeld@yua.com, T: 509-249-3910