

The Long Term Care Nurses Section  
of the  
Rhode Island Health Care Association  
Presents:

**“THE NURSING ASSISTANT”**

NOTE: SAME PROGRAM BEING HELD AT 4 DIFFERENT TIMES FOR YOUR CONVENIENCE

EDUCATION CREDITS:

3 C.E.U's

WHEN:

MONDAY, NOVEMBER 3, 2008  
OR  
TUESDAY, NOVEMBER 4, 2008

WHERE:

Radisson Airport Hotel  
2081 Post Road  
Warwick, Rhode Island

TIME:

|                  |                    |
|------------------|--------------------|
| AM Registration: | 8:00 AM - 8:30AM   |
| Program:         | 8:30 AM - 11:45 AM |
| PM Registration: | 12:30 PM - 1:00 PM |
| Program:         | 1:00 PM - 4:15 PM  |

FEE:

\$ 50.00 PER PERSON

Please RSVP No Later Than OCTOBER 24, 2008

Make Check Payable To: RIHCA/LTC NURSES

Mail Registration Form & Check To:

Rhode Island Health Care Association  
57 Kilvert Street, Warwick, RI, 02886-1009  
Phone: (401) 732-9333 Fax: (401) 739-3103

Please Print Clearly & Mark Which Date & Time is Preferred for Each Attendee

Example Date: 11/3 AM, 11/3 PM, 11/4 AM, 11/4 PM

|                 |                             |
|-----------------|-----------------------------|
| Facility: _____ | Telephone: _____            |
| Attendee: _____ | Date: _____ Position: _____ |
| Attendee: _____ | Date: _____ Position: _____ |
| Attendee: _____ | Date: _____ Position: _____ |
| Attendee: _____ | Date: _____ Position: _____ |
| Attendee: _____ | Date: _____ Position: _____ |
| Attendee: _____ | Date: _____ Position: _____ |
| Attendee: _____ | Date: _____ Position: _____ |
| Attendee: _____ | Date: _____ Position: _____ |
| Attendee: _____ | Date: _____ Position: _____ |

Cancellation Policy: RIHCA/LTCN SECTION RESERVES THE RIGHT TO CANCEL THIS WORKSHOP SHOULD CIRCUMSTANCES DICTATE. A 25% SURCHARGE WILL BE DEDUCTED FROM ALL REFUNDS ON CANCELLATIONS MADE BY FRIDAY, OCTOBER 24, 2008. ABSOLUTELY NO CANCELLATIONS WILL BE ALLOWED AFTER THAT DATE.