

**10th Annual  
Geriatric Issues of the Millenium  
Registration Form**

**Registration Fee \$50 per person  
Group rate of 3 or more \$40 per person  
Registration Deadline: October 12th  
*Includes morning refreshments and lunch*  
Duplicate as needed**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_

*(To receive email confirmation)*

Telephone: \_\_\_\_\_

**Continuing Education Credits:**

CEU's require license number

Social Worker License# \_\_\_\_\_

Registered Nurse License # \_\_\_\_\_

Nursing Home Administration License# \_\_\_\_\_

\_\_\_\_\_  
 Other \_\_\_\_\_

***Return form and payment to:*  
Southwest Health Center  
Senior Behavioral Sciences  
1185 North Elm Street  
Platteville, WI 53818**