



## Lessons from Legends: Power, Policy & Practice

Friday, February 12, 2010 • KU School of Nursing Auditorium • Kansas City, Kansas

**1 Please Print**

Title (Mr., Mrs., Ms., Dr.) \_\_\_\_\_ Full name (First, MI, Last, Suffix) \_\_\_\_\_

Send my confirmation and receipt to this e-mail address:

E-mail \_\_\_\_\_ Job title \_\_\_\_\_

Priority code (Please copy this code located above your name on the mailing label.) \_\_\_\_\_

Credentials \_\_\_\_\_ Specialty \_\_\_\_\_

Institution or firm \_\_\_\_\_

Address ( Home or  Work) \_\_\_\_\_

City, State, ZIP \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_

Daytime phone (\_\_\_\_\_) \_\_\_\_\_ Evening phone (in case of last minute event changes) (\_\_\_\_\_) \_\_\_\_\_

Please include my information on the participant roster.  Please do not include my information on the participant roster.

**2 Fees**

	Register by Jan. 29, 2010	Register after Jan. 29, 2010
<input type="checkbox"/> Advanced Practice Nurse .....	\$100 .....	\$125
<input type="checkbox"/> Nurse .....	\$100 .....	\$125
<input type="checkbox"/> Other Healthcare Professional .....	\$100 .....	\$125
<input type="checkbox"/> Student .....	\$50 .....	\$50

**Total due \$** \_\_\_\_\_

**3 Payment**

**Check enclosed, payable to KU Medical Center.**

Charge to:  MasterCard  VISA (no other cards accepted)

Card # \_\_\_\_\_ Exp. \_\_\_\_\_

Name on card (print) \_\_\_\_\_

**4 Preferred Means of Communication**

Please continue to send KUCE information by (check all that apply):

Mail  E-mail  Fax

Please remove my name from the mailing list.

**5 Easy Ways to Register**

**Mail** Complete the registration form and mail with payment to:  
The University of Kansas  
Continuing Education  
Registrations  
1515 Saint Andrews Drive  
Lawrence, Kansas 66047-1619

**Phone** Toll-free 877-404-5823  
or 785-864-5823

**Fax** 785-864-4871

**TDD** 800-766-3777

**Web** www.ContinuingEd.ku.edu (keyword: Malone)

**Special Accommodation**

If you will need special accommodation, please mark the box above, and a member of the Continuing Education staff will contact you.  
CN107002/JCN100223

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### Program Accessibility

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The University of Kansas Medical Center is an AA/EQ Title IX institution.

### Refund and Cancellation Policy

A full refund of registration fees, less a \$15 administrative fee, will be available if requested in writing and received by January 29, 2009. No refunds will be made after that date. A \$30 fee also will be charged for returned checks. **(Please note that if you fail to cancel by the deadline and do not attend, you are still responsible for payment.)** KU Continuing Education reserves the right to cancel "Lessons from Legends: Power, Policy & Practice" and return all fees in the event of insufficient registration. The liability of the University of Kansas is limited to the registration fee. The University of Kansas will not be responsible for any losses incurred by registrants, including but not limited to airline cancellation charges or hotel deposits.