

Registration Form

IntNSA Executive Office, P.O. Box 14846, Lenexa, KS 66285-4846 or Fax to (913) 895-4652

Register Online: www.IntNSA.org

Final registration deadline is August 18. If you are registering after August 18, please bring your completed paperwork and payment with you to the Annual Educational Conference.

STEP 1: NAME BADGE & ROSTER INFORMATION

*List information as you would like it to appear on your name badge.

*Full Name _____

*Institution _____

Mailing Address _____

*City, State/Province _____ Zip Code _____ Country _____

Phone _____ Fax _____

Email (required) _____

Are you a first-time attendee? Yes No

Do you need special assistance or have special dietary needs? Please explain: _____

In case of emergency: _____
 Name, Relationship _____ Phone _____

STEP 2: REGISTRATION & FEES

PRE-CONFERENCE WORKSHOPS

Pre-Conference Workshop Breakfast \$29

Pre-Conference Workshop Lunch \$35

IntNSA Pre-Conference Workshops

	Postmarked or Faxed by July 14	Postmarked or Faxed by August 18
Full-Day		

Workshop A: CARN & CARN-AP Review Course

Member \$149 \$199

Non-Member \$169 \$219

Workshop B: Trimorbidity: Pain, Addiction & Psychiatric Illness Assessment & Treatment of Patients with Complex Care Issues

Member \$149 \$199

Non-Member \$169 \$219

Half-Day (not included in ASPMN® half-day workshop fee)

Workshop C: Evidence-Based Practice: Learning the Basics

Member \$79 \$129

Non-Member \$99 \$149

Workshop D: Alcoholics Anonymous: What All Nurses Need to Know about 12-Step Recovery

Member \$79 \$129

Non-Member \$99 \$149

Workshop E: Chronic Versus Complicated Pain & Substance Use Disorder: Identifying & Unlocking the Perpetuating Factors & Treatment Strategies (off-site workshop) limit of 24 attendees

Member \$79 \$129

Non-Member \$99 \$149

Workshop F: Genomics: The Science of Discovery & Competencies for Addictions Nursing Practice

Member \$79 \$129

Non-Member \$99 \$149

ASPMN® PRE-CONFERENCE WORKSHOPS

	Member	Non-Member
ASPMN® Pre-conference Boxed Lunch	<input type="checkbox"/> \$35	<input type="checkbox"/> \$35

ASPMN® Pre-Conference Workshops Full-Day

Workshop 1: ASPMN® Pain Management Certification Preparation Course™	<input type="checkbox"/> \$115	<input type="checkbox"/> \$160
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Workshop 2: "Blocking" the Pain	<input type="checkbox"/> \$115	<input type="checkbox"/> \$160
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Workshop 3: Advanced Pharmacology	<input type="checkbox"/> \$115	<input type="checkbox"/> \$160
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Workshop 4: Geriatric Pain Management Course	<input type="checkbox"/> \$115	<input type="checkbox"/> \$160
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Half-Day

8:00 a.m. - 12:00 p.m.

Workshop 5: The Use of Medicinal Cannabis for Chronic Pain	<input type="checkbox"/> \$85	<input type="checkbox"/> \$125
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Workshop 6: The Medicine Walk: Integrating Indigenous Wisdom into Pain Management Nursing	<input type="checkbox"/> \$85	<input type="checkbox"/> \$125
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1:00 p.m. - 5:00 p.m.

Workshop 7: Pediatric Pain Assessment	<input type="checkbox"/> \$85	<input type="checkbox"/> \$125
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Workshop 8: Sickle Cell Disease: Why Is It So Hard to Manage?	<input type="checkbox"/> \$85	<input type="checkbox"/> \$125
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Attend two half-day workshops (applies to Workshops 5-8); must select one morning and one afternoon session. \$100 \$150

Subtotal A: _____

FULL CONFERENCE REGISTRATION

	On or Before July 14	After July 14
Member	<input type="checkbox"/> \$349	<input type="checkbox"/> \$399
New Member (includes membership dues)	<input type="checkbox"/> \$489	<input type="checkbox"/> \$539
Non-Member	<input type="checkbox"/> \$509	<input type="checkbox"/> \$559

Single-Day Registrations

Member:	<input type="checkbox"/> \$150	<input type="checkbox"/> \$175
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Non-Member:	<input type="checkbox"/> \$200	<input type="checkbox"/> \$250
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Day attending: Thursday Friday Saturday

Subtotal B: _____

Registration forms with payment information must be postmarked or faxed on or before July 14 in order to receive the early discounted registration fee, and no later than August 18 to be processed prior to the conference. If you are registering after August 18, please bring your completed registration form and payment to the conference.

STEP 3: SESSION REGISTRATION

Session Registration:

CONCURRENT SESSIONS

Thursday, September 8 – 10:30 a.m. – 11:30 a.m.

- A1-B1 A2 A3 A4

Thursday, September 8 – 11:35 a.m. – 12:35 p.m.

- B2 B3 B4

Thursday, September 8 – 2:20 p.m. – 3:20 p.m.

- C1-D1 C2 C3 C4

Thursday, September 8 – 3:25 p.m. – 4:25 p.m.

- D2 D3 D4

Friday, September 9 – 8:45 a.m. – 9:45 a.m. (ASPMN® Concurrent Sessions)

- 1A 1B 1C 1D 1E 1F

Friday, September 9 – 10:45a.m. – 11:45 a.m. (ASPMN® Concurrent Sessions)

- 2A 2B 2C 2D 2E 2F

Friday, September 9 – 1:40 p.m. – 2:40 p.m. (ASPMN® Concurrent Sessions)

- 3A 3B 3C 3D 3E 3F

Friday, September 9 – 3:30 p.m. – 4:30 p.m. (ASPMN® Concurrent Sessions)

- 4A 4B 4C 4D 4E 4F

Saturday, September 10 – 8:45 a.m. – 9:50 a.m.

- E1 E2 E3 E4

Saturday, September 10 – 10:15 a.m. – 11:15 a.m. (ASPMN® Concurrent Sessions)

- 5A 5B 5C 5D 5E 5F

Saturday, September 10 – 11:25 a.m. – 12:25 p.m. (ASPMN® Concurrent Sessions)

- 6A 6B 6C 6D 6E 6F

Cancellation Policy

Cancellations must be requested in writing and postmarked or faxed on or before August 18, 2011. Please send your requests to the IntNSA Executive Office at intnsa@intnsa.org. Refunds will be issued following the Annual Conference. Refunds will be issued in the same manner as the payment received, minus a \$50 processing fee if received before August 18, 2011. Requests for cancellations postmarked, emailed or faxed after August 18, 2011, are not refundable.

STEP 4: EVENT REGISTRATION

FIFTH ANNUAL IntNSA WALK – 6:00 a.m. – 7:00 a.m. each day

- Thursday, September 8
 Friday, September 9
 Saturday, September 10

IntNSA Walk T-Shirt – \$20 for S-XL, \$22.50 for XXL

Number of Shirts: _____ Indicate Size(s) (S-XXL) _____

SPECIAL EVENTS

Awards Banquet Spouse/Guest Ticket(s) – \$50

Guest Name: _____

MEAL FUNCTIONS

(All attendees are invited to attend, and the meal functions are included in your registration fee, but you must sign up ahead of time in order to participate.)

- Wednesday, September 7 – Welcome Reception
- Thursday, September 8 – Breakfast Symposium
- Thursday, September 8 – Lunch Symposium
- Thursday, September 8 – Awards Dinner
- Friday, September 9 – Annual Business Meeting Breakfast
- Friday, September 9 – Lunch Symposium
- Saturday, September 10 – Breakfast Symposium
- Saturday, September 10 – Lunch Symposium
- Saturday, September 10 – IntNSA/ASPMN® Party

Subtotal C: _____

STEP 5: TOTAL FEES ENCLOSED

- A. Pre-Conference Workshops \$ _____
 B. Conference Registration \$ _____
 C. Event Registration \$ _____

Total Enclosed \$ _____

- Check (IntNSA) Tax ID 36-3273621
 AMERICAN EXPRESS DISCOVER
 MASTERCARD VISA

Card Number _____

Expiration Date _____

Cardholder Name _____

Cardholder Signature _____

All fees must be paid in U.S. dollars, with checks drawn in U.S. funds on U.S. banks.

Please return this form and TOTAL AMOUNT DUE to:

Register Online at:
www.IntNSA.org

By Mail:
 IntNSA Executive Office
 P.O. Box 14846
 Lenexa, KS 66285-4846

By Overnight Courier ONLY:
 IntNSA Executive Office
 18000 W. 105th Street
 Olathe, KS 66061

By Fax (with credit card info):
 (913) 895-4652

Contact the IntNSA Executive Office for further information: (913) 895-4622