



## Enrollment Form

**Thursday October 30, 2008**  
**Tuesday November 18, 2008**  
**Thursday November 20, 2008**

### “Face-To-Face Learning Sessions”

Topics Will Include: Conditions for Coverage Overview, Fistula First, Infection Control, Patient Assessment and Plans Of Care

Please complete and return this form by mail or fax at least 6 days prior to your selected session date.

### Registration Information

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

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

### Choose A Date And Location

\_\_\_\_\_ Thursday October 30, 2008     **Chicago, IL**  
1:00-5:00 PM  
Chicago Marriott Downtown  
540 North Michigan Ave.  
Chicago, IL 60611     Phone # (312) 836-0100

\_\_\_\_\_ Tuesday November 18, 2008     **Cleveland Ohio**  
1:00-5:00 PM  
Intercontinental Hotel Cleveland  
9801 Carnegie Ave.  
Cleveland, OH 44106     Phone# (216) 707-4100

\_\_\_\_\_ Thursday November 20, 2008     **Indianapolis, IN**  
1:00-5:00 PM  
Indianapolis Marriott Downtown  
350 West Maryland Street  
Indianapolis, IN 46225     Phone# (317) 822-3500