

ARN REACH 2018 Conference Registration Form

Palm Beach County Convention Center
West Palm Beach, FL • October 17-20, 2018

FOR OFFICE USE ONLY	
Customer # _____	Mtg Ord # 1- _____
Date _____	I _____

Complete name _____ First name for badge _____
Facility _____ Facility city/state _____
Mailing address (Home Work) _____
City/state/ZIP _____
Work phone (_____) _____ Fax (_____) _____ Home phone (_____) _____
E-mail address* _____
*Required to receive confirmation of registration
In case of emergency during the conference, please contact: _____
Work phone (_____) _____ Home phone (_____) _____
(FTA) Check here if this will be your first ARN conference.

To register, make your selections in the boxes below, add the subtotals, and indicate the total amount in Box I. Be sure to complete Box F.

Full Conference Registration—Wed., Oct. 17–Sat., Oct. 20	A	Optional Events	G			
ARN member <input type="checkbox"/> \$495 <input type="checkbox"/> \$645 Team discount (2–4 team members)* <input type="checkbox"/> \$475 <input type="checkbox"/> \$625 Team discount (5+ team members)* <input type="checkbox"/> \$455 <input type="checkbox"/> \$605 <small>*All registration forms must arrive together or discount will not apply.</small> Join/renew and register <input type="checkbox"/> \$625 <input type="checkbox"/> \$775 Join/renew local chapter (add dues) Chapter name _____ <input type="checkbox"/> \$ _____ Nonmember <input type="checkbox"/> \$695 <input type="checkbox"/> \$845 Student (ID required) <input type="checkbox"/> \$265 <input type="checkbox"/> \$415 Subtotal A \$ _____		Professional Tours (PT) The Woodlands at John Knox Village (PT), Wed., Oct. 17, Noon–4 pm <input type="checkbox"/> \$50 SimBus: A Unique Hands-On Simulation Experience (SIM), Fri., Oct. 19 <input type="checkbox"/> \$30 Choose one: <input type="checkbox"/> 8–9 am <input type="checkbox"/> 9–10 am <input type="checkbox"/> 10:15–11:15 am <input type="checkbox"/> 11:15 am–12:15 pm <input type="checkbox"/> 1:30–2:30 pm <input type="checkbox"/> 2:30–3:30 pm <input type="checkbox"/> 3:45–4:45 pm <input type="checkbox"/> 4:45–5:45 pm RNF Dinner Symposium on Stroke and Caregivers (RNF) Fri., Oct. 19, 6–8:30 pm <input type="checkbox"/> Member: \$215 <input type="checkbox"/> Nonmember: \$265 Tai Chi Easy™ (TC) Fri., Oct. 19, 7–7:45 am <input type="checkbox"/> \$10 Subtotal G \$ _____				
1-Day Conference Registration	B	Guest Passes	H			
Check the day you'll be attending and appropriate rate: <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> Saturday ARN member <input type="checkbox"/> \$290 <input type="checkbox"/> \$440 Nonmember <input type="checkbox"/> \$390 <input type="checkbox"/> \$540 Student (ID required) <input type="checkbox"/> \$210 <input type="checkbox"/> \$360 Be sure to complete Box F. Subtotal B \$ _____		(GST) <input type="checkbox"/> Guest pass _____ No. of guests @ \$120 each \$ _____ Guest Name: _____ Guest Name: _____ Subtotal H \$ _____				
CRRN Review Course (CRRN)—Tuesday, Oct. 16, 8 am–5 pm; and Wednesday, Oct. 17, 8 am–4 pm	C	Special Requests	I			
Member <input type="checkbox"/> \$285 / Nonmember <input type="checkbox"/> \$425 Subtotal C \$ _____		(SDV) <input type="checkbox"/> I will need a vegetarian meal. (OTH) <input type="checkbox"/> I have other needs. Please contact me. (DIS) <input type="checkbox"/> I do not wish to have my name and contact information included in the onsite attendee list.	TOTAL A or B + C + D + E + G + H = Total Amount \$ _____ <small>Please allow ample time for processing payment within your facility to avoid a higher registration fee. (See Box A)</small>			
Preconference Sessions—Wed., Oct. 17	D	Payment (must accompany this form)				
(001) Management of Problematic Behaviors after Acquired Brain Injury (8–11:30 am) Member <input type="checkbox"/> \$135 / Nonmember <input type="checkbox"/> \$185 (002) Professional Rehabilitation Nurse and FIM: Expertise and Collaboration (12:30–4 pm) Member <input type="checkbox"/> \$135 / Nonmember <input type="checkbox"/> \$185 Subtotal D \$ _____		<input type="checkbox"/> Check (enclosed) <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA VISA <input type="checkbox"/> American Express <input type="checkbox"/> Discover <ul style="list-style-type: none">• Make check payable to ARN. • Checks not in U.S. funds will be returned.• A charge of \$25 will apply to checks returned for insufficient funds.• If rebilling of a credit card charge is necessary, a \$25 processing fee will be charged. I authorize ARN to charge the credit card(s) listed amounts reasonably deemed by ARN to be accurate and appropriate.				
RNF Donation	E	Concurrent Session Registration				
Please accept my tax-deductible contribution to support rehabilitation nursing research Subtotal E \$ _____		Concurrent sessions are included with your registration. Please enter the 3-digit number for each session you plan to attend (for space planning only). See conference website for session codes. <table border="0"><tr><td>Thurs., Oct. 18 11 am–12 pm 2 0</td><td>Fri., Oct. 19 11:20 am–12:20 pm 4 0 3:30–4:30 pm 5 0</td><td>Sat., Oct. 20 8:40–9:40 am 7 0</td></tr></table>	Thurs., Oct. 18 11 am–12 pm 2 0	Fri., Oct. 19 11:20 am–12:20 pm 4 0 3:30–4:30 pm 5 0	Sat., Oct. 20 8:40–9:40 am 7 0	
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Conference Buddies I would like to <input type="checkbox"/> have a conference buddy <input type="checkbox"/> be a conference buddy		4 Easy Ways to Register 1. Mail: ARN Conference PO Box 3781 Oak Brook, IL 60522 2. Phone: 800.229.7530 or 847.375.4710 (Credit card payment only) 3. Website: www.rehabnurse.org (Credit card payment only) 4. Fax: 847.375.6481 (Credit card payment only)				

Photography Disclosure: As in past conferences, a professional photographer may take photos of participants at ARN 2018 programs and events. These photos are for ARN use only and may appear on ARN's website, in printed brochures, or in other promotional materials. Attendee registration grants ARN permission and consent for use of this photography.

Cancellation Policy: All cancellations must be made in writing. A \$100 processing charge will apply to all cancellations. No refunds will be made on cancellations postmarked after September 21, 2018. All refunds will be processed after the conference. ARN reserves the right to substitute faculty or to cancel or reschedule sessions due to low enrollment or other unforeseen circumstances. If ARN must cancel, registrants will receive full credits or refunds of their paid registration fees. No refunds can be made for lodging, airfare, or any other expenses related to attending the conference.