

REGISTRATION FORM—NAMI

Space is limited. Registration should be submitted in advance.

Deadline to register: October 7, 2007

Send registration to: NAMI Office
Attn: 2007 Conference
Appalachian Behavioral Healthcare
100 Hospital Drive
Athens, OH 45701

Name

Address

City, State, ZIP Code

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Telephone

Email

Please check the following:

Need Transportation: Yes____ No____

Meal Restrictions: Vegetarian____ Vegan____

Category of Ticket:

Individuals (\$20)_____

Professionals (\$35)_____

Consumers and OU/Hocking College/Rio Grande Students/Faculty
(no charge)_____

Requesting CEUs:

Psychology____ Counselor____ Social Work _____ Nursing_____