

# AAOHN NATIONAL CONFERENCE REGISTRATION FORM

2018 NATIONAL CONFERENCE | **APRIL 16-18, 2018** | PEPPERMILL RESORT | RENO, NEVADA

## REGISTRATION INFORMATION

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Credentials/Designation \_\_\_\_\_

Job Title \_\_\_\_\_

Organization \_\_\_\_\_

Preferred Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

ZIP or Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Daytime Telephone  Home  Work \_\_\_\_\_

E-mail Address (confirmation of registration will be sent via email) \_\_\_\_\_

## DEMOGRAPHICS

### Is this your first AAOHN National Conference?

Yes  No

### If this is not your first conference, how many have you attended?

- 1-2  
 3-5  
 6-10  
 More than 10

### What is the role that most closely describes your work. (Choose one)

- Case Manager  
 Consultant  
 Corporate Manager or Director  
 Educator  
 Health & Wellness Administrator/Manager  
 Manager or Supervisor  
 Nurse Clinician  
 Nurse Practitioner  
 Researcher  
 Retired  
 Safety or Risk Manager  
 Other, please specify: \_\_\_\_\_

### What is your highest educational preparation? (Choose one)

- AD-RN  
 APRN  
 BSN  
 Diploma-RN  
 DNP  
 LPN/LVN  
 MPH

- MSN  
 No Nursing Education  
 Other Baccalaureate Degree  
 Other Doctorate  
 Other Masters' Degree  
 PhD

### Indicate the business sector in which you work, whether as an employee or contracted provider:

- Agriculture  
 Construction  
 Consultant  
 Educational Organization (e.g., university, college)  
 General Business  
 Government/Military  
 Hospital/Medical Center  
 Independent Medical Clinic  
 Insurance/Finance  
 Manufacturing  
 Medical Clinic  
 Mining  
 Onsite  
 Retail/Wholesale  
 Retired  
 Transportation/Communication  
 Other, please specify: \_\_\_\_\_

### In your current role, do you make final decisions and/or recommendations for the purchase of:

- Examination/screening equipment  
 Pharmaceuticals

- Therapeutic products  
 Trauma treatments  
 Safety/personal protective equipment

### What is your annual budget for occupational health and safety-related products and services?

- >\$1,000,000  
 \$999,999 to \$500,000  
 \$499,999 to \$200,000  
 \$199,999 to \$100,000  
 \$99,999 to \$50,000  
 <\$49,999  
 None  
 Unsure

### How long have you worked in occupational health and safety nursing?

### Indicate your overall level of professional achievement within the field of OH&S nursing:

- Competent  
 Proficient  
 Expert

### How did you learn about AAOHN?

- AAOHN Member  
 AAOHN Product  
 Local AAOHN Education Program  
 Physician Recommended  
 *Workplace Health and Safety Journal*  
 Other, please specify: \_\_\_\_\_

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## Early Registration

*(On or before March 2, 2018)*

- Member Registration: \$545
  - Non-Member: \$850
  - Student/Retired: \$225
  - Single Day Member: \$380
  - Single Day Non-Member: \$620
- Please check one for Single Day Registration:*
- Monday  Tuesday  Wednesday

## Regular Registration

*(After March 2, 2018)*

- Member Registration: \$590
  - Non-Member: \$895
  - Student/Retired: \$255
  - Single Day Member: \$620
  - Single Day Non-Member: \$665
- Please check one for Single Day Registration:*
- Monday  Tuesday  Wednesday

## PROFESSIONAL DEVELOPMENT WORKSHOPS

Session Number	Course Name	Member Price	Non-Member Price
<b>100</b>	COHN/COHN-S Review Course (2.5 Days)	\$715	\$945

### SATURDAY, APRIL 14

#### Half-Day Courses: 1:30 pm - 5:00 pm

<b>101</b>	Change the Aging Mindset: Creative Strategies for an Aging Workforce	\$190	\$230
<b>102</b>	Does Your Hearing Program Need a Face Lift? Updates in Science and Technology	\$190	\$230
<b>103</b>	Project Management for OHNs	\$190	\$230
<b>104</b>	The Role of the Occupational Health Nurse in Evidence-based Practice (EBP) and Research	\$190	\$230

### SUNDAY, APRIL 15

#### Full-Day Courses: 8:00 am - 4:00 pm

<b>201</b>	A Practical Approach to the Neuro-Musculoskeletal Assessment (Neck, Back, Hand, Shoulder, Knee and Feet)	\$335	\$395
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#### Full-Day Courses: 8:00 am - 5:00 pm

<b>202</b>	Occupational Health Nurse Practitioner Boot Camp	\$335	\$395
<b>203</b>	CAOHC Recertification Course	\$595	\$595

#### Half-Day Courses: 8:30 am - 12:00 pm

<b>204</b>	Compassion Fatigue – What Is This?	\$190	\$230
<b>205</b>	Safety Tour	\$190	\$230
<b>206</b>	I'm An OHN Now. So What Do I Do???	\$190	\$230

#### Half-Day Courses: 1:30 pm - 5:00 pm

<b>208</b>	Step Up. Stand Out. Lead.	\$190	\$230
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Subtotal A: \_\_\_\_\_

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## SPECIAL EVENTS

### Monday, April 16

- New Member and First Time Attendee Orientation - FREE
- AAOHN Foundation Event - \$80
- Annual Business Meeting (Members Only) - FREE

### Wednesday, April 18

- AAOHN Foundation Wellness Event - Chair Yoga - FREE
- Guest Registration - \$200**  
Guests can join you at our Opening and Closing Ceremonies, General Session, Catherine Dempsey Lecture, in the Exhibit Hall, and includes beverage breaks. **There are no contact hours given with this registration.**

Guest Full Name: \_\_\_\_\_

Subtotal B: \_\_\_\_\_

**GRAND TOTAL:** \_\_\_\_\_

## REGISTRATION CANCELLATION POLICY

Cancellations received on or before March 2, 2018 will receive a full refund minus \$100 processing fee. No refunds will be issued for requests made after March 2, 2018. All cancellation requests must be submitted in writing to [registration@aaohn.org](mailto:registration@aaohn.org)

### Registration Transfer

Only members can transfer a registration to another member. A member cannot switch their registration to a non-member. Name changes are only permitted when received in writing. All name changes during pre-registration should be sent to [registration@aaohn.org](mailto:registration@aaohn.org).

## PAYMENT INFORMATION

We care about your privacy: payment by credit cards can only be made online. In order to comply with the Payment Card Industry Data Security Standard (PCI DSS) we will not accept credit card numbers over the phone, by mail, or fax.

### Please mail your registration and check to:

AAOHN Registration  
330 N. Wabash Avenue, Suite 2000  
Chicago, IL 60611

## SPECIAL NEEDS

If you have special needs, please let us know and we will do our best to accommodate you.

Please list any allergies or dietary requirements:

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- Check here if you do not wish to receive information from exhibitors via mail or email.

**Please note:** On occasion, an AAOHN photographer may take photos of participants at AAOHN National Conference functions and activities. Please be aware that these photos are for AAOHN use only and may appear in AAOHN conference programs, catalogs, brochures, newsletters, journals, on the AAOHN website, or in other AAOHN materials. Your attendance constitutes your permission and consent for this photography.