



OFFICE OF RURAL HEALTH POLICY
STATE OFFICES OF RURAL HEALTH

Region C Grantee Meeting

August 10-11, 2011

Conference Registration

University Place

Indianapolis, IN 46202 | (800) 627-2700

PLEASE TYPE OR PRINT LEGIBLY (Please complete one form per person)

First Name: _____

Name on Badge (as you prefer on the badge) _____

Last Name: _____

Title: _____

Organization: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip/Postal: _____

Phone: _____ Fax: _____

Email: _____

INFORMATION

University Place

850 W. Michigan Street
(800) 627-2700

Room Rate: \$91 Per night / single

Reservation Deadline: **July 9**

Hotel Required (if yes, please check)

Please make your hotel reservations directly with the hotel at: (800) 627-2700

MEAL OPPORTUNITIES (Please assist us in making an accurate meal count, indicate which meals you plan to attend)

Special Meal Requirements: Vegetarian Gluten Free Other _____

Wednesday, August 10, 2011

Thursday, August 11, 2011

- Breakfast
- AM Break
- Lunch
- PM Break

- Breakfast
- AM Break
- Lunch
- PM Break

REGISTRATION INFORMATION

Registration Deadline: **July 9, 2011**

Registration fee:

SORHs & ORHP Staff – no charge

Partners & Others - \$140 Per person

TOTAL DUE: \$ _____

Please make checks payable to: NOSORH

Payable by mail or on-site at the meeting

Sorry no credit cards accepted

Please fax or email this completed form to **Donna Pfaendtner**
NOSORH, 44648 Mound Rd., #114, Sterling Heights, MI 48314
Phone: 586-336-4627 | Fax: 586-336-4629 | Email: donnap@nosorh.org