

NRHA Conference Registration

State Rural Health Association Leadership Conference

July 11-12, 2017

Rural Quality and Clinical Conference

July 12-14, 2017

Nashville, Tenn.

The Quality and Clinical Conference is an interactive conference for quality and performance improvement coordinators, rural clinicians, quality improvement organizations, and nurses practicing on the front lines of rural health care.

Sign up by June 8 and take advantage of early registration rates.

Hotel Information:

Sheraton Nashville Downtown

888-627-8565

Mention NRHA to receive the exclusive room rate.

Registration options

Online: RuralHealthWeb.org/quality

By mail: National Rural Health Association
4501 College Blvd., Ste. 225, Leawood, Kan.
66211 *(Please include payment with registration form.)*

Questions? Call 816-756-3140 or email
registration@nrharural.org.

Cancellation policy: Cancellations made at least 3 weeks prior to the event will be charged a 30% administrative fee. No refunds for cancellations after this date.

Sign me up for both the SRHA Leadership Conference and the Rural Quality and Clinical Conference.

☐ Register for both conferences and receive \$100 off the total price. Not applicable for road trip or student discount rates.

Sign me up for the SRHA Leadership Conference.

Early registration rate, deadline June 8:

☐ \$189

After June 8:

☐ \$239

Sign me up for NRHA's Rural Quality and Clinical Conference.

Early registration rate, deadline June 8:

☐ \$289 NRHA member ☐ \$369 Non-member*

After June 8:

☐ \$319 NRHA member ☐ \$419 Non-member*

Road trip rate for attendees from Tennessee, Kentucky, Virginia, North Carolina, Mississippi, Alabama, Georgia, Arkansas and Missouri.

☐ \$149 for members ☐ \$249 for non-members*

Students receive a 50 percent discount on all conference rates. *Price includes a one-year complimentary membership for first-time NRHA members.

Name: _____ Title: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Payment: ☐ Check or purchase order (payable to NRHA)

Credit Card: ☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Card number: _____ Expiration date: _____ Security code: _____

Name on card: _____ Billing zip code: _____ Signature: _____

