



This form ONLY needs to be filled out if you are unable to register online

The Hawaii Society for Respiratory Care
presents
The 42nd Annual State Respiratory Care Conference

October 20 & 21, 2015
Ala Moana Hotel, Oahu, Hawaii

Target Audience: Respiratory Therapists, Physicians & Nurses
Course Registration Form (please print)
CRCE credits for Respiratory Therapists pending approval from AARC

Name:

☐ Mr. ☐ Ms. ☐ Mrs. ☐ Dr.

(print name as you want it to appear on your name badge and certificate of attendance)

Professional Credential(s):

☐ CRT ☐ CRT-SDS ☐ RRT ☐ RRT-NPS ☐ RRT-SDS

☐ MD

☐ RN

☐ CPFT

☐ AE-C

☐ FAARC

☐ RRT-ACCS ☐ OTHER: _____

Academic Degree:

☐ Baccalaureate

☐ Masters

☐ Doctorate

Workplace: _____

Best Contact Number: _____

Email Address: (required) _____

(your conference registration confirmation will be sent here, this is a required entry)

As an active member or soon to be active member of the HSRC, I give permission for the HSRC to use the email address I have given with this registration to communicate with me for the sole purpose of Society business.

☐ **Yes, I do**

☐ **No, I do not**

Registration Fees: Please indicate with an "x" which day or days you plan to attend

AARC Members (current thru Oct 2015 or later)	Tues 10/20	Wed 10/21	Registration by 10/1/2015	Registration after 10/1/2015 or on-site
Individual one (1) day			\$165	\$195
Individual two (2) days			\$250	\$280
Non-AARC Registrant			Registration by 10/1/2015	Registration after 10/1/2015 or on-site
Individual one (1) day			\$240**	\$270**
Individual two (2) days			\$320**	\$350**

Payment in US Dollars (check, money order, cashier's check) must accompany registration form.

****AARC Membership included**

Please make check payable to:

HAWAII SOCIETY FOR RESPIRATORY CARE

You may also register for the conference and pay online at:

hawaiiircps.org/attendees

Mail registration form and payment to:

Ms. Jamie Abe, BASRC, RRT-NPS, Treasurer

Hawaii Society for Respiratory Care

c/o Respiratory Care Dept

Kapiolani Medical Center for Women & Children

1319 Punahou St, Honolulu, HI 96826

CANCELLATION POLICY:

Cancellations must be in writing. There is a 35% handling fee for cancellations received by October 3, 2015. No refunds will be made thereafter.

For question about registering for the conference please contact Jamie Abe at jamiesparacio@gmail.com