



Inaugural Nursing Research Conference

Registration Form

November 5, 2009

Registration forms must be received by October 19, 2009

Name: _____

Last 4 SS# _____ **Occupation:** _____

Healthcare Organization: _____

Address: _____

City, State, Zip: _____

Phone Number: _____ **Fax #:** _____

Email address: _____

Please enclose registration fee of \$20 made out to Nursing Research Council-VAEA with your registration form and mail to:

**April V. Hamilton
Nursing Research Council
Veterans Affairs Medical Center
510 Butler Ave, Room 6A-150
Martinsburg, WV 25405**

Mary G. Heinen, RN MSN Mary.Heinen@va.gov 304 263-0811x3696

Margaret Washington, RN BSN Margaret.Washington@va.gov 304 263-0811x3896

Laura Clayton, PhD, RN lclayton@shepherd.edu 304 876-5459