“Care Transitions: Care Across the Continuum”

Registration Form

September 21, 2017
Crowne Plaza, Little Rock

Name __________________________________________________________

Title ______________________________________________________________________

E-Mail ________________________________________________________________

Organization ___________________________________________________________

Address __________________________________________________________________

City _________________________________ State _________ Zip ______________

Telephone _________________________ FAX ___________________________

There is no fee for registration, but all team members must register in advance in order to attend.

Questions:
Contact Cindy Harris with questions regarding this event. She can be reached by phone (501-224-7878) or by email charris@arkhospitals.org.

2 Ways to Register:

Fax: 501-224-0519
Attn: Cindy Harris

Mail: Attn: Cindy Harris
Arkansas Hospital Association
419 Natural Resources Drive
Little Rock, AR 72205