



15th Annual Turn on the Light National Conference on the Wellbeing of Children & Families

Palm Beach County Convention Center West Palm Beach, FL
October 23, 2018

Partner Registration

*Registration includes Continental Breakfast, Lunch, 3 workshops, and CEUs**

Please note that parking is not included in the registration rate

For **online registration** and payment, visit **www.TurnontheLight.org**

Name: _____

Title: _____

Company: _____

Address: _____

Phone: _____ Fax: _____

Email: _____

Affiliation (name of partner club, agency or organization you are a member or employee of):

Special Rate Code: _____

Vegetarian meal requested? Y N

Continuing Education credits (CEUs / CEs / CLEs) requested? Y N

Licensed profession: _____ License #: _____

The following two questions will help us learn more about our attendees to assist in conference development and planning. We appreciate your answers.

Are you parenting a child under the age of 18? Y N

Please let us know your involvement in the fields of Social Service, Education, Healthcare or Law Enforcement/Emergency Services:

N/A Student Volunteer Intern Board Member

Employed Other: _____

Partner Registration Rates ~~\$99~~ (early registration) / ~~\$124~~ (after October 1st) **\$85**

** Group registration rates and form available at www.TurnOnTheLight.org

Please complete payment information on next page.

Method of Payment

Check enclosed made payable to The Children's Healing Institute (Amount: _____)

Charge my credit card (*please complete the information below*)

AMEX VISA MasterCard Card # _____ Exp _____

CIV/CSC Code** _____ Name on Card _____

**3 or 4 digit number located on back of card

Amount \$ _____ Signature _____

Billing Address _____

City _____ State _____ Zip _____

•CE credits pending for Respiratory Therapists, Licensed Midwives, CNAs, RN/LPN/ARPNs, Clinical Nurse Specialists, Nutrition Counselors, Dietician/Nutritionists, LCSW/LMHC/LMFTs, Psychologists and Attorneys.

All registrations are final and non-refundable.

**Questions? Call 561-687-8115 - Return completed Registration form to:
The Children's Healing Institute – 2161 Palm Beach Lakes Blvd. Suite 406 - WPB, FL 33409
FAX 561-687-8116 or SSantosus@ChildrensHealingInstitute.org**