MICHIGAN SOCIETY FOR RESPIRATORY CARE

2019 Spring CONFERENCE | APRIL 3-5



Online registration at www.michiganrc.org ends March 22, 2019. Onsite registration will be available April 3rd - 5th at the Radisson.

PERSONAL INFORMATION (please print)

T ENSONAL INTO	(please plint)		
Name			Credentials
Employer/School Name		Billing Address	
		_	
City		State	Zip Code
Email		1	Phone Number
MSRC#		AARC#	
	the House Meeting (Wednesday 5:30 – 6:30 pm) C to send a letter to my U.S. Representative	on my behalf regarding cu	urrent Respiratory Therapy Legislation
REGISTRATION C	PTIONS (please select one)		
Conference Regist	tration (Includes all lectures on Thursday and Frie	day with an option to add VAE	Workshop*
(Wednesday): MSRC/AARC Member Non-Member Student Member Student Non-Mem	Before 3/22/19 \$199 Before 3/22/19 \$410 Before 3/22/19 \$50	After 3/22/19 \$240 After 3/22/19 \$450 After 3/22/19 \$75 After 3/22/19 \$195	Add VAE Workshop Registration Required No Additional Charge
		TOT	AL Registration Price \$
A-la-Carte Package (Choose ONE day of Conference attendance with option to add VAE Workshop* (Wednesday): Please choose ONE day of attendance: Thursday OR Friday Add VAE Workshop Registration Required			Add VAE Workshop Registration Required
MSRC/AARC MemberNon-MemberStudent MemberStudent Non-Mem	Before 3/22/19 \$255 Before 3/22/19 \$50	After 3/22/19 \$190 After 3/22/19 \$295 After 3/22/19 \$75 After 3/22/19 \$150	 □ Before 3/22 \$25 - After 3/22 \$40
		TOT	AL A-la-carte Package Price \$
VAE Workshop (Wednesday) ONLY (Workshop only with NO daily Conference attendanc *Ventilator Associated Event (VAE) Workshop: MSRC has partnered with MHA (Michigan Hospital Association) for a half day interactive workshop that includes VAE surveillance, round table discussion regarding challenges and current practices of VAE, and prevention strategies. Preregistration is required. This interactive workshop is geared towards Supervisors, Lead Therapist, Directors, Managers, and future leaders of RT.			-
	e if you do not want your name and contac ations will be sent via e-mail)	ct information distributed	to conference vendors
☐ Visa ☐ MasterCard	Card Number		Exp. Date
☐ Discover☐ AMEX	Authorized Signature		Date
☐ Check enclosed (payable to MSRC)	Please send or fax your completed registration form Suite 1900 Lansing, MI 48933 Telephone: 517-267-		