

**I Would Like To Register for the following Curative CBRF Training Classes
(Submit a separate form for each person attending)**

Fire Safety	<input type="checkbox"/> Tuesday, July 20, 2010 • 9 am - 1 pm	Course Fees/Handouts - \$70
Resident Rights	<input type="checkbox"/> Tuesday, June 22, 2010 • 9 am - 2:30 pm	Course Fees/Handouts - \$45
Dietary Needs	<input type="checkbox"/> Thursday, June 17, 2010 • 9 am - Noon	Course Fees/Handouts - \$45
Challenging Behaviors	<input type="checkbox"/> Tuesday, June 29, 2010 • 9 am - 3:30 pm	Course Fees/Handouts - \$45
Personal Cares	<input type="checkbox"/> Thursday, July 8, 2010 • 9 am - Noon	Course Fees/Handouts - \$45
Client Group Specific	<input type="checkbox"/> Tuesday, July 13, 2010 • 9 am - 2:30 pm	Course Fees/Handouts - \$45
Needs Assessment	<input type="checkbox"/> Thursday, May 27, 2010 • 9 am - 2 pm	Course Fees/Handouts - \$45
First Aid & Choking	<input type="checkbox"/> Tuesday, June 15, 2010 • 9 am - 1 pm	Course Fees/Handouts - \$70
Standard Precautions	<input type="checkbox"/> Tuesday, June 8, 2010 • 9 am - 11:30 pm	Course Fees/Handouts - \$70
		Total Due:

Name _____ Employer _____
 Address _____ City _____ State _____ Zip Code _____
 Daytime Phone _____ E-mail Address _____

**Make check or money order payable to Curative Care Network. Mail registration form and payment to:
 Caty Bulgrin • Curative Care Network • 1000 N. 92nd Street • Milwaukee, WI 53226**

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