

Registration Form for MDS 3.0 Validation Program Training

**MDS 3.0 Validation Program Training
"BECOME THE EXPERT"**

MDS 3.0 Overview, RUG-III Update and Case Mix

Registration is also available on-line at <http://nc.mslc.com> – Click on "Seminars"

(One registration per form, please. Copy form for additional registration)

Please Print

Name: _____ Title: _____

Facility/Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ Email: _____

Will you need Continuing Education Hours for: Nursing Administrators None Needed

If Nursing, enter the state abbreviation: _____ License #: _____ RN LPN

If Administrator, enter the state abbreviation: _____ License #: _____

Please check the date you would like to attend:

- | | | |
|---|---|--|
| <input type="checkbox"/> Asheville (August 23) | <input type="checkbox"/> Asheville (August 24) | <input type="checkbox"/> Charlotte (August 25) |
| <input type="checkbox"/> Charlotte (August 26) | <input type="checkbox"/> Winston-Salem (August 27) | <input type="checkbox"/> Raleigh (August 30) |
| <input type="checkbox"/> Greenville (August 31) | <input type="checkbox"/> Fayetteville (September 1) | |

MAIL REGISTRATION FORM TO:

**Myers and Stauffer LC,
Attn: North Carolina Training
9265 Counselors Row, Suite 200
Indianapolis, IN 46240-6419**