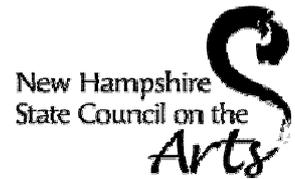




**Arts in Healthcare Symposium 2013**  
**Friday, June 7th, 8:30am - 3:30pm**  
**Concord Hospital in Concord, NH**



**Symposium Registration**  
**for Health Care Leaders and Practitioners**

**Please note:** Limited seats are available; we encourage early registration. Please use one form per person and make copies as needed for additional registrants. *Print clearly and be sure to keep a copy for your records.*

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Organization: \_\_\_\_\_  Check for Professional Development Credits  
(5.0 Nursing Contact Hours or 5.0 AMA PRA Category I Credits)

Work telephone: \_\_\_\_\_ Work e-mail: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

What is the best way to contact you? \_\_\_\_\_

**Symposium Registration Fee** – Postmarked **by May 31, 2013:** **\$45** includes registration and lunch.  
*Registrations will be accepted first come, first served, on a space-available basis.*

**Fees & Payment Policies**

**Checks should be made out to Concord Hospital.**

**Send registration form & check to:**

Alice Kinsler, Therapeutic Arts & Activity Services  
 Concord Hospital, 250 Pleasant St, Concord, NH 03301

*Refunds, minus a \$5 administrative fee, will be made on cancellations received by **May 31, 2013**. All requests for refunds must be made in writing to Alice Kinsler and include a stamped, self-addressed envelope.*

**Check <http://www.nh.gov/nharts/> for Symposium details and on-line registration options.**

**Photography/videography:** By initialing here \_\_\_\_\_ you give permission for your photograph to be taken during the Symposium to be used in NHSCA publications and/or on the NHSCA website.

**We encourage carpooling** and will try to connect you with attendees from your area if you indicate here \_\_\_\_.

**May we include your name and contact information** on a participants' list that will be made available to all Symposium attendees? \_\_\_\_ Yes \_\_\_\_ No

**Special Needs:** If you require a special accommodation due to disability, please contact Alice Kinsler by 5/ 31 with a brief description of your needs so we can make every effort to accommodate your requests.

*Have you completed the on-line 2013 New Hampshire Arts in Health Care Survey?* \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If not, please go to: <https://www.surveymonkey.com/s/63L3L37>

If you have additional questions or need more information, please contact:  
**Alice Kinsler** Phone: 603-227-7000 x3867; email: [akinsler@crhc.org](mailto:akinsler@crhc.org)