STEP ONE: Your Information (please print)

Name (please include designations: i.e. RN, MT, BSN, etc.)
Title
Hospital
Address, City, State, ZIP
Phone
Email
Dietary Restrictions
STEP TWO: Payment Information
Leadership Institute program registration = \$3,600
☐ Pay by Check (please make check payable to NHA Foundation)
☐ Invoice Me

## **STEP THREE: Register**

Mail your registration and payment to: Nebraska Hospital Association 3255 Salt Creek Circle, Suite 100

Lincoln, NE 68504-4778

OR SCAN/EMAIL your registration to: <a href="mailto:lleach@nebraskahosptials.org">lleach@nebraskahosptials.org</a>

Registration deadline is January 15, 2024. Space is limited, so please register early to secure your seat.

