**HOTEL INFORMATION**

Marriott - Century Center
2000 Century Blvd NE
Atlanta GA 30345-3377

Start Date: 9/13/15 and
End Date: 9/14/15

Room Type | Single | Double  
---|---|---
Price     | $124.00 | $124.00

The above rates will be honored (based on availability) two days prior and post the above dates.

**REGISTRATION INFORMATION**

Conference registration and hotel rooms are limited. All registrations must be accompanied by payment. For registration information, email Tammy Carter at tcarter1@gru.edu

**Registration Fees:** Fees include the sessions, conference program, CD, lunch, breaks and CEU certificate. Registration deadline is Sept. 1, 2015.

**Payment Method:** No personal checks will be accepted at on-site registration. Cash or credit cards will be accepted.

Note that an email will be sent to confirm participant conference registration. Checks must be cleared prior to the conference or the committee reserves the right to ask for cash payment for the conference at the door.

**CANCELLATION POLICY**

The Region 6 Conference Committee reserves the right to cancel any offering in the event of a program cancellation; registration fees are automatically refunded. For applicants who wish to cancel registration, written requests for refunds must be received by Sept. 1, 2015. Refund checks (less a processing fee of $30) will be mailed within 10 weeks after the conference.

**CONFERENCE DESCRIPTION**

The rapid expansion of knowledge in the care of the critical care patient continues to challenge all nurses in their efforts to keep up-to-date and to provide quality care. This two-day nursing conference covers a wide range of topics related to new trends and procedures in care delivery for the critical care patient. The nationally recognized faculty of healthcare professionals will emphasize cutting-edge technology, continuum of care, and diverse therapeutic modalities for the management of patients with specific critical care illnesses.

**CONFERENCE OBJECTIVES**

- Disseminate the latest concepts in critical care nursing.
- Identify opportunities for nurses to increase their knowledge in special interest areas.
- Promote the professional development of critical care nurses.
- Increase nurses’ awareness of technological advancements in patient care.
- Provide opportunities for collaboration and networking among critical care professionals.

**AACN Vision**

We are dedicated to creating a healthcare system driven by the needs of patients and families where critical care nurses make their optimal contribution.
Keynote Speaker: AACN National President Karen McQuillan, RN, MS, CNS-BC, CCRN, CNRN, FAAN

We are pleased to have our National President share her vision for AACN at our Regional Conference!

McQuillan is a clinical nurse specialist (CNS) at R Adams Cowley Shock Trauma Center, University of Maryland Medical System, Baltimore, a position she’s held since 1987. An investigator, author and presenter on issues related to trauma and nursing, McQuillan holds a faculty associate position with University of Maryland School of Nursing, Baltimore. Her numerous honors include the 2011 Society of Trauma Nursing Trauma Leadership Award, the Nursing Spectrum, Washington/Baltimore edition, 2007 Excellence Award for Teaching and the 1997 Nurses of Excellence. McQuillan earned a nursing degree from University of Maryland College Park in 1979 and Bachelor of Science in nursing from University of Maryland, Baltimore in 1981, where she graduated magna cum laude and earned a Master of Science in trauma/critical care nursing in 1986.

CONFERENCE PRICING

<table>
<thead>
<tr>
<th>National &amp; Local Members</th>
<th>National Members Only (w/ copy of AACN member card)</th>
<th>Non-AACN Members</th>
<th>Undergraduate Students (with copy of Student ID)</th>
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REGISTRATION DETAILS

Please complete the following registration form and payment details for each registrant and return to: CCN Registration • Attn: Tammy Carter • 2928 Bridgeport Drive • Augusta, GA 30909.

Photocopies are acceptable. Members please send copy of card(s).

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<th>RN</th>
<th>LPN</th>
<th>Student</th>
<th>Other</th>
<th>AACN member #</th>
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Full Name (please print clearly)

Address

City

State

Zip

Home Phone

Business Phone

Provide Email Address or Fax Number (for electronic confirmation)

METHOD OF PAYMENT

Check # ________          Money Order #________

Check # ________          Money Order #________

Address of Payor including Zip Code ___________________________________________________________________________________

Continuing Education: The American Association of Critical-Care Nurses is approved by the California Board of Registered Nursing, Provider Number 01036. This program has been approved for a total of 10.10 Contact Hours, File Number 0019328.

If you have any disability & require assistance to facilitate your participation, contact Tammy at tcarter1@gru.edu or call 706-564-2015.