Shaping the Future of Long Term Care: It's All About Quality

(vertical sidebar) MASSACHUSETTS SENIOR CARE ASSOCIATION

Massachusetts Senior Care Association
2018 Annual Meeting & Trade Show
Thursday, November 8, 2018
DCU Center, Worcester
9:30am - 3:30pm
8:30am Registration & Continental Breakfast

Congressman Neal

Protecting Medicare and Medicaid in the 116th Congress
Honorable Guest Speaker
U.S. Congressman Richard Neal
Representing the First Congressional District of Massachusetts
Ranking Member, House Committee on Ways and Means

Keynote Address: DC Update
Mark Parkinson | President & CEO,
American Health Care Association/
National Center for Assisted Living (AHCA/NCAL)

Mark Parkinson

Afternoon Session
Department of Public Health Presentation on Nursing Home Quality Initiatives

DAY AT A GLANCE

8:30 am – 9:30 am	**Registration & Continental Breakfast**
9:30 am – 11:30am	**Morning Session (2 CEUs)**
11:30 am – 1:30 pm	**Walking Lunch, Trade Show with 100+ Vendors**
1:30 pm – 3:30 pm	**Afternoon Session (2 CEUs)**

Premier Sponsor CliftonLarsonAllen

MASSACHUSETTS SENIOR CARE ASSOCIATION

Online registration is not available for this Members Only event.
Please complete the attached registration form.
Questions? Contact Mass Senior Care at 617-558-0202.

2018 Massachusetts Senior Care Annual Meeting & Trade Show

Thursday, November 8, 2018
DCU Center, Worcester • 9:30am – 3:30pm

Member Facility/Organization
REGISTRATION FORM
This is a Mass Senior Care members only event.

Facility/Company:	
Address:	
City, State, Zip:	
Phone #:	**Fax #:**

Please clearly print name, title and email address of each attendee.
Confirmations will be sent via email.
Email address will be given to our Member Exhibitors for pre and post show mailings.

	Name of Attendee(s)	**Title**	**Email Address**
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____

CEUs will be available for Administrators, Nurses and Social Workers
(Application for social work continuing education credits has been submitted.)

Fees: *Individual Fee:* **$125**
    Facility Fee: **$250 (includes maximum of 10 staff from the SAME facility)**
    Corp./Regional Office Fee: **$300 (maximum of 10 people)**

Method of Payment:

Credit Card: ☐ MasterCard ☐ Visa ☐ AMEX

Account Number: _____ Exp. Date: _____/_____

CID Code (3 or 4 digit): _____ Name on Card: _____

Billing Address (if different than above): _____

_____

Check for $_____ enclosed   *Make check payable to and mail to: Massachusetts Senior Care*

Please e-mail, fax or mail this form to:

Massachusetts Senior Care Association
800 South Street, Suite 280
Waltham, MA 02453

Telephone: 617-558-0202
Fax: 617-558-3546
E-Mail: Lnguyen@maseniorcare.org