

2025 NE NURSES DAY AT THE LEGISLATURE VIRTUAL, ON-DEMAND EVENT | CONTENT OPENS FEBRUARY 20

PROVIDED BY THE NEBRASKA NURSES ASSOCIATION & THE MIDWEST MULTISTATE DIVISION

GROUP REGISTRATION PAYMENT FORM

PLEASE TYPE OR PRINT

Name of Group/School: _____

Group/School contact person: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

2025 REGISTRATION FEES

1) Please indicate the total number of RNs, Nursing Faculty, and students you wish to register in the spaces below.

2) Please list (type) the names of each individual planning to participate in the Nebraska Nurses Day at the Legislature On-Demand on the Group Registration List available on our website.

**For those registering licensed, practicing RNs/APRNs, please also mark on the Group Registration List if the individual plans to participate in the live, in-person Capitol Experience on February 20.*

**For those registering prelicensure students and RN faculty, indicate if they are interested in participating in the Capitol Experience on February 27.*

3) Submit both forms by email to the Nebraska Nurses Assoc office by February 14 – *email required*

_____ Registered Nurse \$ 75.00

_____ Nursing Faculty \$ 75.00

_____ Pre-Licensure Student \$ 30.00

TOTAL Amount Enclosed \$ _____

PAYMENT METHOD

\$ _____ Total Amount Enclosed

Check (*Payable to the Nebraska Nurses Association*)

Charge to: [] Mastercard [] VISA [] American Express [] Discover

Card # _____ Exp Date: _____ CVV: _____

Billing Address, City & State: _____ Billing Zip: _____

Card Issued to: _____
(Please type or print)

Cardholder Email: _____ (If different than registrant email)

REFUND/CANCELLATION POLICY

We encourage you to identify a qualified substitute if you cannot participate. Registration fees, less a \$25.00 processing fee, will be refunded to participants who cannot participate and notify the NNA/MSD office in writing of the cancellation by February 1, 2025. No refunds will be made after February 1, 2025.

DEADLINE FOR REGISTRATION: FEBRUARY 14, 2025

EMAIL, MAIL OR FAX COMPLETED FORM(S) TO:

NEBRASKA NURSES ASSOCIATION ♦ C/O 3340 AMERICAN AVE. STE. F ♦ JEFFERSON CITY, MO 65109

FAX ♦ 573-636-9576

EMAIL ♦ SARA@MIDWESTNURSES.ORG

QUESTIONS ♦ 888-885-7025