

## Mather LifeWays Institute on Aging Registration Form

To register for a course, please complete the following form and return it by mail or fax to the address or number below. We will confirm your request within three working days of receipt.

Workshops	Date/Time	Number Attending	Cost
<b>Essentials of Culture Transformation</b> 1-day train-the-trainer workshop			\$295/person
<b>LEAP Long Term Care</b> 2-day train-the-trainer workshop			Call for pricing information
<b>Walk the Talk: Culture Change for Assisted Living Communities</b> 1-day train-the-trainer workshop			\$295/person
<b>It's All About Relationships</b> 1-day train-the-trainer workshop			\$295/person
<b>PREPARE</b> 1-day train-the-trainer workshop			\$395/person
<b>SAFE-TI: A Falls Reduction Program</b> 1-day train-the-trainer workshop			\$295/person
<b>Webinars *</b>			
<b>Essentials of Culture Transformation</b> 3-part series or individual webinar			\$250/organization \$99/organization
<b>Walk the Talk: Culture Change for Assisted Living Communities</b> 3-part series or individual webinar			\$250/organization \$99/organization
<b>It's All About Relationships</b> 3-part series or individual webinar			\$250/organization \$99/organization
<b>PREPARE</b> 3-part series or individual webinar			\$250/organization \$99/organization
<b>SAFE-TI: A Falls Reduction Program</b> 3-part series or individual webinar			\$250/organization \$99/organization
<b>Wellness Webinars (individual webinars)</b>			\$49/organization
<b>Wellness Webinars (series)</b>			\$249/organization
<b>Online Courses</b>			
<b>Care Coaching Online</b>			\$159/person
<b>Empower Online</b>			\$159/person
<b>Gerontology Online</b> Single course 6-course certificate series			\$159/person \$859/person
<b>Total</b>			

### Organization Information

Organization/Community Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Contact Person Name \_\_\_\_\_  
 Title \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Email \_\_\_\_\_  
 How did you hear about us? \_\_\_\_\_  
 Referred by your state association? Y / N  
 State association \_\_\_\_\_

### Participant Names (excluding webinar participants)

Name \_\_\_\_\_  
 Position \_\_\_\_\_  
 Phone \_\_\_\_\_  
 E-mail \_\_\_\_\_

Name \_\_\_\_\_  
 Position \_\_\_\_\_  
 Phone \_\_\_\_\_  
 E-mail \_\_\_\_\_

(Please photocopy this form if there are more than 2 participants.)

### Payment Method

Check enclosed (Payable to **Mather LifeWays Institute on Aging**)  
 Visa     Mastercard

Card Number \_\_\_\_\_  
 Expiration Date \_\_\_\_\_  
 Verification Code \_\_\_\_\_  
 Name on Card \_\_\_\_\_  
 Billing Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Signature \_\_\_\_\_

### Send registration form to:

**Mather LifeWays Institute on Aging**  
**Attention: Lisa Amendola**  
**1603 Orrington Avenue**  
**Suite 1800**  
**Evanston, IL 60201**

OR

**Fax to:**  
**Attention: Lisa Amendola**  
**(847) 492.7444**

**Questions? Contact Louise Lyons**  
[ll Lyons@matherlifeways.com](mailto:ll Lyons@matherlifeways.com) or (847) 492.7433

**\*An unlimited number of participants may attend from an organization, however, only one webinar login and connection line may be used.**

