

2016 KHDA ANNUAL RETREAT AND CONFERENCE

October 12-14, 2016

The Campbell House

1375 South Broadway

Lexington, Kentucky 40504

Phone: 859-255-4281

REGISTRATION FORM

Name _____

Position _____

Health Department/Company _____

Health Department/Company Address _____

City _____ State _____ Zip _____

Phone: _____ Email: _____

Spouse name, if attending _____

Registration for Conference is \$100.00.

- Registration fee enclosed.
- Please bill me at the above address.
- I am faxing my form and will mail the check.
- Registration fee paid by Department for Public Health (Accreditation Coordinators only)

Please check those meals you plan to attend:

- Lunch, Wednesday, October 12
- Cookout, Wednesday, October 12
- Breakfast, Thursday, October 13
- Lunch, Thursday, October 13
- Presidential Dinner, Thursday, October 13
- Breakfast, Friday, October 14

Make checks payable to: KHDA

Return to: KHDA ANNUAL CONFERENCE RETREAT

P.O. Box 4647

FRANKFORT, KY 40604-4647

Or fax to: (502) 226-5155

Room reservations can be made by calling The Campbell House at 859-255-4281. Please mention you are with KHDA. **Rooms will be blocked until September 12, 2016.** After that date, rooms may or may not be available. You may download this form at www.khda-ky.org. Questions? Contact Steve Bing at sbing.kpha@gmail.com, (502) 875-2255 Office or (502)229-0464 Cell; or Jill LeMaster at jlemaster.kpha@gmail.com.