



Changing Birth Practices from the Inside Out and the Outside In

Date: Friday, April 9, 2010
 Location: Edmonds Conference Center, 201 4th Ave North, Edmonds, WA 98020
 Website: www.REACHE.info

2010 CONFERENCE REGISTRATION

**If you are registering a group and paying with one check, each person must fill out the registration form and mail it to the address below.*

**Early bird registration is \$110 and ends 3/15/10. Beginning 3/16/10, the conference fee will change to \$120 per person.*

Last Name _____ First Name _____

Address _____

City _____ ST _____ ZIP _____

E-Mail Address _____

(Please print very clearly. Your registration confirmation, CEU credits, and access to presentation materials go to this e-mail address!)

Phone Number _____

Conference Fees: *Make checks payable to REACHE*

Item	Quantity	Fee	Total
Conference Registration		\$110 until 3/15/10 \$120 beginning 3/16/10	
Printed Speaker Presentation Materials		\$15	
Total			

Check Number _____

Demographic Information

I am a : Childbirth Educator/ Midwife/Nurse/ Physician/ Birth Doula/ Postpartum Doula/ Other

My employer/work location: _____

I heard about this conference: Postcard/ Flyer/ Colleagues/ Yahoo Group/ E-mailed Announcement/ Other

Mail this registration and your payment to: REACHE c/o Debra Shelden, PO Box 302, Kirkland, WA 98083