

# TSSCVPR GEM Program Registration form

Please fill out the form below to register for the GEM Program.

<b>Name:</b>	
<b>Address:</b>	
<b>City:</b>	
<b>State:</b>	
<b>Zip code:</b>	
<b>E-mail:</b>	

I pledge to recruit at least one new member to TSSCVPR before the 2008 Annual Symposium.

Your name may be listed on TSSCVPR.org as a GEM participant. Check the box if you *do not* want your name listed.

Send registration form to:  
Sue Wolski, MSN, RN  
156 Kent Circle  
Lower Gwynedd, PA 19002

For more information call or e-mail Sue Stahl at 215-612-5360  
[sstahl@fhcs.org](mailto:sstahl@fhcs.org)