



RESTORE JOY NOW 2015 CONFERENCE

NOVEMBER 5-6, 2015
MAGGIANO'S LITTLE ITALY
JACKSONVILLE, FL

GROUP REGISTRATION FORM (5 OR MORE ATTENDEES)

Group Registration Type	Early Bird (ends Aug. 15)	Regular (Aug. 16 - Nov. 1)
Full 2-Day Group Registration (\$ per person)	\$189	\$219
Single Day Group Registration (\$ per person)	\$129	\$139

Select only one of the following:	<input type="checkbox"/> Full 2-Days <input type="checkbox"/> Single Day (Thursday, 11/5) <input type="checkbox"/> Single Day (Friday, 11/6)
Email Address:	
First Name & Last Name:	
Home Address, City, State, Zip:	
Phone Number:	
Nursing License Number + Credentials:	
Any Dietary Restrictions?	
Are you attending either of the optional Pre-Conferences breakfast sessions: <i>Circle your selection(s)</i>	Thursday, 11/5: "Blending Approach to Faith-Based and Secular Leadership" Friday, 11/6: "Reinventing Self after Job Loss, Retirement or Just Time for a Change"
Select your break-out sessions, only 1 per line: <i>Circle your selections</i>	<u>Thursday</u> : "Improving Employee Engagement" or "Proactive Approach to Problem-solving/small group exercise" <u>Friday Morning</u> : "Managing Bullying Behaviors in the Workplace" or "Reducing Distractions, Enhancing Execution" <u>Friday Afternoon</u> : "Succession Planning" or "Tips for Managing Personal Finances"
Is there an issue or concern you would like to discuss/problem-solve in a small group?	
Is there a topic of interest to you that is not on the program agenda?	
Are there any questions or comments you would like to share before submitting?	

Credit Card Processing by Mail: Complete registration form below

Please charge my Credit Card:	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover
Cardholder's First & Last Name:	
Credit Card Billing Address:	
Credit Card Number:	
Expiration Date & CVV or CID Code	(mmyy) _____ (3-4 digit verification code) _____
Total Paid:	\$ _____.
Cardholder's Signature:	

Check Payment by Mail

My check is enclosed and made payable to Restoring Joy to Leadership.	<input type="checkbox"/> YES
Mail Checks with <u>COMPLETED REGISTRATION FORMS (one/person) TOGETHER</u> in same envelope to: Restoring Joy to Leadership, LLC - 10109 Vineyard Lake Road E, Jacksonville FL 32256	