



The University of the West Indies
Faculty of Medical Sciences
THE UWI SCHOOL OF NURSING, MONA
Presents

**24th Nursing and Midwifery Research Conference &
25th Mary J. Seivwright Day**

"Nursing and Midwifery Research: the pathway to quality healthcare"

Location: UWI School of Nursing, Mona
May 29-30, 2014

REGISTRATION FORM

Please print or type

Title: (Prof/Dr/Miss/Mrs/Mr) **First Name:** _____ **MI** _____ **Last Name:** _____

Mailing Address: _____

Tel. Work: _____ **Home:** _____ **Fax:** _____ **Email:** _____

Organization: _____ **Address:** _____ **Country:** _____

Title of Post: _____

Professional Organization(s) of which you are an active member: _____

Professional Group: ☐ Midwife ☐ Nurse Midwife ☐ Reg. Nurse ☐ Enr. Asst. Nurse ☐ Other _____

Qualification: ☐ Certificate/Diploma ☐ Bachelors ☐ Masters ☐ PhD ☐ Other (Specify) _____

BASIC STUDENTS: ☐ General Nursing Student ☐ Midwifery Student ☐ Enrolled Assistant Nurse Student ☐ Other _____

PAYMENTS

	LOCAL		REGIONAL		INTERNATIONAL	
	One Day	Two Days	One Day	Two Days	One Day	Two Days
PROFESSIONAL	[] JM\$3,000	[] JM\$6,000	[] US\$50	[] US\$100	[] US\$100	[] US\$200
STUDENT	[] JM\$1,500	[] JM\$3,000	[] US\$20	[] US\$40	[] US\$25	[] US\$50
RETIREE	[] JM\$1,500	[] JM\$3,000				

**PLEASE NOTE that registration fees is non-refundable except
under conditions outlined on website**

Registration Includes: Conference Package, Coffee Break, Lunch, and
Certificate of attendance (showing CE hours)

Method of Payment:

☐ Cash ☐ Cheque ☐ Online

NB: Cheque or Money Order
Make payable to:
The UWI School of Nursing, Mona

Signature _____ **Date:** _____

You may photocopy this form

OFFICE USE ONLY

Receipt /Reference Number	Date of Registration
Type of payment	Name of Receiving Officer