

PLEASE FOLLOW THE INSTRUCTIONS ON THIS PAGE, CLOSELY. FILL IN ALL BLANKS.

NAME			
RCP#			
ADDRESS			
CITY	ZIP	PHONE	
EMAIL		_AARC#	

Non-refundable processing fee: \$30.00 for NON-AARC members per certificate. **** Checks may be payable to the KRCS. ***** Please do not send cash. Additional charges to apply on any returned check.

**If submitting this for the CEUs earned prior to April 1, the prior year, there is a \$50.00 fee for each CERTIFICATE regardless of AARC Membership per CEU Policy approved December 3, 2009.

Make checks payable to the KRCS

ADDRESS TO SEND TO:

Monica Baden

520 E. Berry

Rose Hill, Ks. 67133

Check all boxes below before submitting application.

A PROOF OF ATTENDANCE				
THIS IS A LIVE CEU AND NO	OT A RECORDIN	G OF A PREVIOUS	SEMINAR.	
Seminar Date *	* If submitting after the renewal period has ended, there is a \$50 fee* see above			
Seminar Time				
Agenda/ Schedule (needed to ca	lculate number of	CEUs)(should be on brochu	re)	
Name and Credentials of speake	er, (should be on brochure)			
Objectives (should be on brochure)				
Fee or membership check one	AARC member	\$30 nonmember	\$50 submitted after renewal period regardless of membership	

SELF ADDRESSED STAMPED ENVELOPE ***(so I can send it back to you)

May take up to 14 days to process request.