



UNIVERSITY MEDICAL CENTER  
OF EL PASO

REGISTRATION FORM

**“Supporting Patient-Centered Initiatives: Through Nursing Research  
and Evidence Based Practice”**

**Friday, May 16, 2014**

**at the El Paso Natural Gas Conference Center on the UTEP Campus  
adjacent to the UTEP School of Nursing on Wiggins Rd.**

***Please print:***

Name: \_\_\_\_\_

Circle: APRN RN LVN

Birth Month and Day (MM/DD): \_\_\_\_\_

Organization Name & Dept: \_\_\_\_\_

Email address: \_\_\_\_\_

Daytime phone no.: \_\_\_\_\_

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**Registration fee: FREE - Includes continental breakfast, free parking permit, and  
contact hours**

Please fax and/or email to Veronica Archuleta, Nursing Education Coord.  
([varchuleta@umcelpaso.org](mailto:varchuleta@umcelpaso.org)); fax: (915) 521-7990.