



**"HEALTH RIGHTS OF TEENS"**

**May 18 & 19, 2006**

**Oakland, CA**

Name \_\_\_\_\_

Title \_\_\_\_\_

Organization \_\_\_\_\_

Organization Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

Email Address \_\_\_\_\_

Adult

OR

Youth

Meal preference (check one)

Vegetarian

Non-vegetarian

Other - please specify

Continuing education credit approval is still pending. If available, would you be interested in CEU's? Yes  No

License type (check all that apply):

License number \_\_\_\_\_

RN

LVN

LPT

LCSW

CHES

The San Francisco Department of Public Health, Community Health Education Section has been designated as a provider of continuing education

**For nursing:** "The California State Board of Registered Nursing has approved the San Francisco Department of Public Health-Community Health Education Section-Code, as a Provider of Continuing Education for Registered provider # CEP 03548."

**For social work:** "The California Board of Behavioral Sciences has approved the San Francisco Department of Public Health-Community Health Education Section-Provider #1389, as a Provider of Continuing Education for MFCC, MFT, AND LCSW's."

**For health educators:** "The Community Health Education Section and the San Francisco Department of Public Health has

been designated as a multiple event provider of continuing education by the National Commission for Health Education Credentialing, Inc., Provider # CA0039"

**Fees** (check one)

For registrations made:

<b>By April 14</b>	<b>After April 14</b>	<b>Speaker Registration Fee</b>
Adult \$150   ρ	\$175   ρ	Adult \$50   ρ
Youth \$50   ρ	\$75   ρ	Youth \$25   ρ

**Please mail this form and payment payable to Adolescent Health Conference to:**

Adolescent Health Conference  
3333 California Street, Suite 245  
San Francisco, CA 94118

Refund requests must be made in writing and will only be considered after May 19, 2006.

If you have questions or cancellations, please contact:

**Sharon Kosch, Conference Coordinator at**

**[conference@californiateenhealth.org](mailto:conference@californiateenhealth.org) or (510) 612-6040**