



Attendance and Credit Form for CBE Pre-Conference Course
Clinical Breast Examination Certification Course
19th Annual National Interdisciplinary Breast Center Conference
 Planet Hollywood Resort & Casino Hotel Las Vegas, Nevada
Saturday & Sunday March 14-15, 2009

RT

Medical License Number _____ State _____

This form will be used as verification of your attendance, and certificates will be mailed by May 29, 2009. Note the time for each session you attended and list the total hours you are requesting for credit. At the end of the seminar, please submit this to the NCBC registration desk.

PLEASE PRINT CLEARLY

Name:

Signature:

Phone:

City:

State:

Saturday March 14	Sunday March 15		Hours Attended RT Credits
8:00AM – 5:30 PM	8:00AM – 12:00 PM	Clinical Breast Examination Certification Course	6.0
Total Conference Hours For Saturday & Sunday CBE Course:			6.0