

**REGISTRATION FORM**

***Pittsburgh Mercy Parish Nurse & Health Ministry Dinner & Gathering***

A part of Pittsburgh Mercy and Trinity Health, serving in the tradition of the Sisters of Mercy

***Health Ministry: Success in Church and Community***

**Friday, November 9, 2018**

**Registration 5 p.m. Dinner 6 p.m.—8 p.m.**



Please send completed registration form along with a check made payable to the *Pittsburgh Mercy Parish Nurse & Health Ministry Program* **by October 26** to:  
Pittsburgh Mercy Parish Nurse & Health Ministry Program

Mercy Health Center  
1515 Locust Street, Suite 705  
Pittsburgh, PA 15219-5154



Name \_\_\_\_\_  
First Name Middle Initial Last Name

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Telephone \_\_\_\_\_

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

Name of Church or Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Denomination \_\_\_\_\_

Your role within your church/organization (please check all that apply):

- Clergy
- Member/attendee
- Health ministry coordinator RN
- Coordinator health minister
- Faith community nurse (volunteer)
- Faith community nurse (salaried)
- Health Minister
- Other \_\_\_\_\_
- Social minister
- Social worker
- Nursing student
- Volunteer
- Pittsburgh Mercy employee
- Seminarian
- Registered nurse



**REGISTRATION FORM** (continued)

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Are you a board-certified faith community nurse (RN-BC)? \_\_ Yes \_\_ No

If Yes, year of certification \_\_\_\_\_

Are you a member of the Health Ministries Association, Inc.? \_\_ Yes \_\_ No

Do you have any dietary restrictions and/or require special accommodations in order to attend?

Yes (please explain):

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I am a RN and am applying for nursing education credits (CEs)? \_\_ Yes \_\_ No

**Please read the statements below and check all that apply.**

I permit you to publish my name and the name of the organization I represent on my nametag and in the event participant listing.

I would like to receive information periodically about continuing education opportunities from Pittsburgh Mercy Parish Nurse & Health Ministry Program and Pittsburgh Mercy.

I would like to receive your free monthly E-Newsletter, *The Faith Connection*. Please add me to your mailing list.

I prefer not to be contacted.

NOTE: The Pittsburgh Mercy Parish Nurse & Health Ministry Program and Pittsburgh Mercy do not sell or otherwise share information with third-party vendors. You reserve the right to revoke your permission at any time.

For more information, contact the Pittsburgh Mercy Parish Nurse & Health Ministry Program at

412.232.5815 or email [ParishNurse@pittsburghmercy.org](mailto:ParishNurse@pittsburghmercy.org).

**PRESENTED BY THE PITTSBURGH MERCY PARISH NURSE & HEALTH MINISTRY PROGRAM**

**PART OF TRINITY HEALTH, SERVING IN THE TRADITION OF THE SISTERS OF MERCY**

<https://www.pittsburghmercy.org/>