

**Alzheimer's Association
2020 BrainWorks Conference**

We are so glad you were able to attend the 2020 BrainWorks Conference on Alzheimer's and Other Dementias.

NO Contact Hours will be granted for partial attendance. Checking in at the beginning of the day will serve as evidence of attendance. Failure to perform the morning registration will automatically disqualify you to receive contact hours.

Certificates will be available at the END of the conference. You must stop by the DMACC table and pick it up personally to receive your contact hours.

FULL NAME: _____

SOCIAL SECURITY NUMBER OR DATE OF BIRTH: _____

NURSING LICENSE NUMBER: _____

HOME ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

CELL PHONE: _____ **LAND LINE:** _____

EMAIL ADDRESS: _____

Evaluations may be submitted to:

Iowa Board of Nursing
River Point Business Park
400 SW 8th St, Ste B
Des Moines, IA 50309-4685