Intentional Governance: Board Leadership for Tomorrow



OBJECTIVES: By the end of the Workshop, participants will:

- Gain insights, tools, and materials to enhance your understanding of governance best practices
- Develop a network of peers for the exchange of information and mutual support
- Examine approaches, assumptions, questions, and practices regarding nonprofit governance

Friday, December 13th Begins at 2:00 pm with dinner at 6:00 pm

Saturday, December 14th 8:00 am – 11:30 am

Registration:

- \$50 for PIHN members
- \$100 for non-members

ACCOMMODATIONS: Please call 304-744-4641 to make reservations at the **Holiday Inn and Suites**, 400 Second Ave., Charleston, WV. Refer to block code: **CRD** to receive special room rate of \$99 per night. Rooms will be released and no longer held for our group after November 21, 2013. All guests receive a complimentary breakfast buffet.

Registration due by November 22, 2013

 ${\tt OFFERED} \hspace{0.1in} {\tt BY:}$

IN COLLABORATION WITH THE



Institute for Health Care Governance Leadership for Improved Health.



Board Development Workshop Registration Form

December 13 & 14, 2013 Holiday Inn & Suites, South Charleston, WV

Registration Information: (Please type or clearly print.)

| Name: | Organization: | | |
|----------|---------------|--------|--|
| Address: | | | |
| City: | State: | Zip: | |
| Phone: | Fax: | Email: | |

Method of Payment:

| Check Money Order Credit Card Amount Enclosed \$_ | (Please do not send cash) | | | |
|---|---------------------------|-------------|------|--|
| If paying by Check: Check # | En | closed \$ _ | | |
| If paying by Credit Card: Credit Card: MC Visa Card # | E> | Exp. Date: | | |
| Cardholder's Name: | | | | |
| Cardholder's Address: | | | | |
| City: | _State: | | Zip: | |
| Cardholder's Signature: | | Date: _ | | |

Make Check or Money Order Payable to: The Center for Rural Health Development, Inc.

Fees:

\$50 PIHN member

\$100 non-PIHN member

You will receive a confirmation email to the address provide upon receipt and processing of your registration.

Registrations due November 22, 2013

Send to:

Ginger Grose, Executive Assistant The Center for Rural Health Development, Inc. 75 Chase Drive, Hurricane, WV 25526

Phone: 304-397-4071 Fax: Attention: Ginger Grose, 304-397-4076 Email: ginger.grose@wvruralhealth.org



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