



**Reproductive Care Program**  
Halifax Professional Centre  
700-5991 Spring Garden Road  
Halifax, NS B3H 1Y6  
Phone: 902-470-6798 Fax: 902-470-6791  
<http://rcp.nshealth.ca>

## Advances in Labour and Risk Management (ALARM)

### REGISTRATION FORM

Saturday & Sunday, May 5 & 6, 2018

IWK Health Centre, Halifax, NS

### Please Print

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone # (H) \_\_\_\_\_ (Cell) \_\_\_\_\_

Email \_\_\_\_\_

Food Allergies: \_\_\_\_\_

Please check one:  Physician - \$995.00 – CFPC # \_\_\_\_\_

Nurse - \$730.00  Midwife- \$730.00  Resident - \$730.00  PGY1  PGY2

**Please make cheque payable to:**

Reproductive Care Program of NS

**Mailing address:**

Reproductive Care Program of NS

Halifax Professional Centre, 700 - 5991 Spring Garden Road, Halifax, NS B3H 1Y6

**or**

**Credit Card Payment:**

**NAME ON CARD:**

**TYPE OF CARD:** \_\_\_ VISA \_\_\_ MASTERCARD \_\_\_ AMEX

**CARD NUMBER:** \_\_\_\_\_

**Expiry Date (MM/YY):** \_\_\_\_\_

**Amount to be debited to the card:** \$ \_\_\_\_\_

**Fax # 902-470-6791 or email: [joanne.ings@iwk.nshealth.ca](mailto:joanne.ings@iwk.nshealth.ca)**