

A Celebration of Leadership

Honoring Judy Lentz, RN, MSN, NHA

Chief Executive Officer



The Alliance for Excellence in Hospice and Palliative Nursing



Hospice and Palliative Nurses Association



National Board for Certification of Hospice and Palliative Nurses



Hospice and Palliative Nurses Foundation

A recognition dinner with Judy and her family will be held during the AAHPM/HPNA Annual Assembly on **Thursday, March 8, 2012** in Pyramid Peak in the Pinnacle Club, Grand Hyatt Denver in Colorado.

6:30-7:30pm Cash Bar in Pyramid Peak Foyer (37th Floor) in the Pinnacle Club

7:30-9:30pm Dinner in Pyramid Peak in the Pinnacle Club

The cost to attend is \$90 per person. Payment is required at time of reservation.

Cancellations are not refundable and any cancellation monies will be gifted to the Hospice and Palliative Nurses Foundation.

Reservations will be accepted through February 23, 2012.

- Meal selection (choice of *Beef, Chicken or Vegetarian*) to be made at the time of reservation.
- A small portion of each payment will benefit the Hospice and Palliative Nurses Foundation.

Please contact the National Office, 412-787-9301, with any questions or need for additional information.

Please complete page 2 and return to HPNA by mail or fax on or before February 23, 2012.

A Celebration of Leadership Dinner

Honoring Judy Lentz, RN, MSN, NHA

Chief Executive Officer



Reservation For

Ms./Mr./Dr. _____

Address _____

Email _____

My menu preference is:

- Beef
- Chicken
- Vegetarian

The cost to attend is \$90 per person:

- My payment is enclosed (Checks payable to HPNA please):**

Please mail to HPNA, One Penn Center West Suite 229, Pittsburgh, PA 15276

- \$90 for reservation
- In celebration of Judy's leadership, I would like to make an additional gift to the Hospice and Palliative Nurses Foundation in the amount of:
 \$250 \$150 \$75 \$25 \$_____

- Please charge my credit card (Fax this form with credit card information to 412-787-9305):**

Payment Information: Type of Credit Card Visa MasterCard Discover American Express
Credit Card #: _____ - _____ - _____ - _____ Expiration Date: (00/00) _____

Required: security number found on back of credit card _____

Charge Amount:

- \$90 for reservation
- In celebration of Judy's leadership, I would like to make an additional gift to the Hospice and Palliative Nurses Foundation in the amount of: \$250 \$150 \$75
 \$25 \$_____

Print name as it appears on credit card: _____

Signature _____

- I am unable attend, but in celebration of Judy's leadership, I would like to make a gift to the Hospice and Palliative Nurses Foundation in the amount of:**

\$250 \$150 \$75 \$25 \$_____

Please Respond by February 23, 2012

Cancellations are not refundable and any cancellation monies will be gifted to the Hospice and Palliative Nurses Foundation.