



Everyone can make a difference at the Statehouse!

# Your Voice Counts

**Dates:** January 17, 2012  
February 21, 2012

**Time:** 10am—2pm  
Luncheon provided

**Location:** IHCA  
One N. Capitol, Suite 100  
Indianapolis, IN 46204

**Members:**  **FREE**

**Non-Members:** \$100  
Session includes instruction,  
lunch, and Statehouse tour

**1.0 CEU for HFAs**

**To Register:**  
FAX: 317-638-3749

MAIL: IHCA  
One N. Capitol, Suite 100  
Indianapolis, IN 46204

EMAIL: [keller@ihca.org](mailto:keller@ihca.org)

Questions? Call Katie Eller at  
(317) 616-9028

<b>Payment (circle):</b>
IHCA Member
Non-Member
<b>Date of Event (circle):</b>
January 17      February 21

### Program Description:

Your Voice Counts is an event that allows you to effectively communicate with your lawmakers. Packed with information and common-sense advice, this program will guide you through every step—from how a bill becomes a law to how your message can play a critical role in this legislative process.

### Every Voice Counts—We Need Yours!

### Who should attend?

EVERYONE! Everyone can make a difference at the Statehouse!

### Can I really make a difference?

YES! Your stories and experiences are compelling and real, and they allow your lawmakers to put a face on these important issues. Your presence in Indianapolis is powerful and our residents deserve your help.

### Can IHCA host a special Your Voice Counts day for my facility?

Absolutely! IHCA would be happy to host a special day just for your organization. For more information, please contact Dennis Neary at (317) 616-9024 or [dneary@ihca.org](mailto:dneary@ihca.org)

FACILITY NAME: _____
REGISTRANT NAME(s): _____
FACILITY ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
TELEPHONE: ( ) _____ FAX: ( ) _____
EMAIL ADDRESS(es): _____
PAYMENT METHOD (circle) : Check (Payable to IHCA)      VISA      MC      AMEX
Credit Card #: _____ Exp. Date: _____
3 digit CVC# (back of card): _____ Amount: \$ _____
I agree to not record by any electronic means any part of this program without the express permission of the Indiana Health Care Association.

*Cancellation Policy: Refunds will be given, minus a \$25 administrative fee, only if written notice is received 2 business days prior to event. Substitutions are welcome. Cancellation after day of event will not receive a refund.*

