



Bringing Organ Donation Awareness
 To Our Faith Communities
Addressing Interfaith End-of-Life Decisions

Friday, September 18, 2009
9:00 a.m. – 2:30 p.m.

A program for Faith Leaders, Parish Nurses, Social Workers,
 Pastoral Care Providers, Lay Health Ministers, and Medical Staff.

First Presbyterian Church
510 West Ottawa Street, Lansing

8:00 - 9:00 a.m.

Registration and Continental Breakfast

9:00 a.m. – 2:30 p.m.

Understanding the Need

Partners on the End-of-Life Journey

Spiritual Connection to Organ Donation

Organ Donation 101

National Donor Sabbath: *Preparing Your Faith Community*
 with Personal Reflections throughout the day

Cost: \$10.00

Breakfast and Lunch included. Scholarships available.

4.5 contact hours have
 been approved by the
 Ohio Nurses Association

4.0 CE hours have been
 approved by the
 Michigan Social Work
 Continuing Education
 Collaborative



Coalition of
MICHIGAN



GIVE SO OTHERS CAN LIVE

For more information contact Cathy Warren,
 Donate Life Coalition of Michigan: mmcc589@sbcglobal.net ~ 248-701-2323

This continuing nursing education activity was approved by the Ohio Nurses Association.
 The Ohio Nurses Association (OBN-001-91) is accredited as an approver of continuing nursing education by the
 American Nurses Credentialing Center's Commission on Accreditation.

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September 18, 2009

Registration Form

Name: _____

Title: _____

Street Address: _____

City/State/Zip: _____

Daytime Number: (_____) _____

Evening Number: (_____) _____

Email Address: _____

Please check all that apply. I am a ...

Faith Leader Parish Nurse Social Worker Health Minister Nurse
 Pastoral Care Provider Other _____

Please complete if applicable.

Faith Organization Represented:

Church Name: _____

Address: _____

City/State/Zip: _____

Phone Number: (_____) _____

Approximate size of congregation: _____

Hospital Affiliation:

Hospital Name: _____

Address: _____

City/State/Zip: _____

Phone Number: (_____) _____

Please RSVP by September 14th. Send completed form and \$10.00 session payment (check made payable to 'Donate Life Coalition of Michigan') to:

MAIL:

Cathy Warren
Donate Life Coalition of Michigan
4532 Chadsworth Street
Commerce Twp., MI 48382

FAX: 248-366-9871
EMAIL: mmcc589@sbcglobal.net

Questions: Please contact Cathy 248-701-2323 / 248-366-7301 / mmcc589@sbcglobal.net