



Asian Services In Action, Inc.

## Registration Form

**Providing Culturally Competent Care to  
Asian Populations : a luncheon presentation for health  
care providers**

**Presenter: Rita Pobanz, MSN, RN**

**Date: Saturday June 19<sup>th</sup>**

**Time: 11:30-Registration**

**12N – 2 pm Presentation**

**Location: Asian Services In Action (ASIA, Inc.)**

**3631 Perkins Ave, 2A-W**

**Cleveland, OH 44114**

**Full Name:** \_\_\_\_\_

**Organization:** \_\_\_\_\_

**Preferred Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip/Postal Code:** \_\_\_\_\_

**Telephone:** ( \_\_\_\_\_ ) \_\_\_\_\_ **Fax:** ( \_\_\_\_\_ ) \_\_\_\_\_

**Email:** \_\_\_\_\_

**PLEASE CHECK APPROPRIATE OCCUPATION:**

- |               |                          |                       |                          |
|---------------|--------------------------|-----------------------|--------------------------|
| Nurse         | <input type="checkbox"/> | Outreach Worker       | <input type="checkbox"/> |
| Doctor        | <input type="checkbox"/> | Health Educator       | <input type="checkbox"/> |
| Social Worker | <input type="checkbox"/> | Other (Specify) _____ | <input type="checkbox"/> |
| Psychologist  | <input type="checkbox"/> |                       |                          |

Please list any Special Dietary Needs:  Vegetarian  Vegan  Other

**Please mail. E-mail or fax completed registration form: Asian Services In Action (ASIA), Inc.**

**Phone: 216-881-0330 x 208**

**3631 Perkins Ave, 2A-W**

**FAX: 216-881-6920**

**Cleveland, OH 44114**

**Email: [sburgess@asiainc-ohio.org](mailto:sburgess@asiainc-ohio.org)**