June Meeting
"WE ARE BACK"
South Florida Healthcare Networking Group
Plan to attend this event on

Thursday, June 30, 2022

You are invited to the monthly meeting of the
South Florida Healthcare Networking Group (SFHNG)
Presented by the *South Florida Hospital News and Healthcare Report*
Sponsored by
South Florida Healthcare Executive Society
South Florida Hospital and Healthcare Association

Hosted by WELLINGTON REGIONAL MEDICAL CENTER
Thursday, June 30, 2022 from 7:45am to 10:00 am.
Attendance will be limited to the first 30 paid reservations
No Walk – In's

Who should attend:
Healthcare Professionals, Hospital Executives and Department Heads, Insurance Providers,
Attorneys and Accountants. Home Care and Nursing Home Administrators
Physicians, Nurses, Healthcare Students, University and Allied Health School Professionals,
Suppliers of Products and Services to the Healthcare Community

Address:
Wellington Regional Medical Center
10101 Forest Hill Blvd
Wellington, FL 33414
(561) 798-8500

Click Here for Directions

Date and Time:
Thursday, June 30, 2022
From 7:45am to 10:00am

Cost:
$25 per person - includes admission to the event and a continental breakfast. Due to
limited space, advance reservations and advance payment are required. American
Express, Mastercard and Visa are accepted. Please complete the reservation form below
and email to charles@southfloridahospitalnews.com or fax to 561-368-6978.

SPACE IS LIMITED TO THE FIRST 30 PAID RESERVATIONS ONLY

ALL ATTENDEES MUST BE VACCINATED AND MASKS ARE REQUIRED

<u>**RESERVATION FORM**</u>

MEETING JUNE 30, 2022

<u>**For Credit Card Processing**</u>
FAX Reservation to: 561-368-6978 or
Email: charles@southfloridahospitalnews.com
or
Mail a copy of the Reservation Form and a check to:
South Florida Hospital News and Healthcare Report
PO Box 812708
Boca Raton, FL 33481-2708

NAME_____

COMPANY_____

TITLE _____

Company Address _____

City _____ State _____ Zip _____

EMAIL ADDRESS _____

Office Phone _____ Cell Phone _____

Credit card Information:

Name on Card:_____

Billing Address:_____

City:_____ State:_____ Zip:_____

PLEASE CHARGE MY CREDIT CARD: MASTERCARD / VISA / AMEX (circle one)

No._____ Exp. _____

Security Code: _____

Signature: _____

Phone:_____

TOTAL AMOUNT: $_____

Paid Reservations are non-refundable.
For questions or more information on this program, please call 561-368-6950 or email
charles@southfloridahospitalnews.com