



MICHIGAN ENA Website Announcement Form

Emergency Nurses Association Michigan Council

Date of Event: _____

Time of Event: _____

Name of Event: _____

Speaker: _____

Sponsor of Event: _____

Address of Event: _____

Coordinator of Event: _____

Coordinator's Phone Number: _____

Coordinator's email: _____

RSVP information: _____

Dinner included: _____

Cost of event: _____

CE offered: _____

Attach Flyer if available.

Send picture if available.

Requesting: Posting on website _____ E-mail to membership _____

Submit in writing to the MENA President, 2127 Brenthaven, Bloomfield Hills, MI 48304 or
e-mail document to: markgoldstein1967@yahoo.com