



Join Home Instead Senior Care for this day-long seminar with renowned Dementia specialist

*Teepa Snow*, MS, OTR/L, FAOTA



To us, it's personal.

Join us:

February 22  
Oakland

The Waterfront Hotel  
10 Washington Street  
Oakland, CA 94607  
510.836.3800

Registration 8am  
Program 9am - 4pm

RSVP 510.663.3652  
or mail in the form below

This seminar will address:

# Changing the World of Alzheimer's

Promoting Wellness & Well Being after the Diagnosis  
Creating Days that have Meaning and Joy

**\$50 processing fee per attendee**  
Lunch Included

Teepa Snow is an occupational therapist specializing in dementia care and education. In addition to her private practice, Teepa has clinical appointments with Duke University's School of Nursing and UNC-Chapel Hill's School of Medicine. She is a frequent speaker on dementia care to gerontology and health care professional programs throughout the U.S. Teepa provides training and education to the Alzheimer Association, Alzheimer Society, state health care provider organizations, professional association meetings and caregiver associations or programs. For a full bio, please see [www.teepasnow.com](http://www.teepasnow.com).

**Eligible for 6CEU credits**

For health care professionals, this course has been approved by the California State Board of Registered Nurses BRN for RNs, LVNs, RCFEs and CNAs. (6 hours), provider No. CRP 11967.

MFTs and/or LCSWs has been approved by the California Board of Behavioral Sciences. (6 hours), provider No. PCE 987.

Pre-registration sign-in, and evaluation turned in at the end of the conference is required to obtain credits.

**Additional Sponsors Include:**



All profit from this event will be donated to the Alzheimer's Association.

Register for our  
Teepa Snow  
seminar today!

### Registration Information

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Email: \_\_\_\_\_ License# (for CEUs): \_\_\_\_\_  
Agency Name (for CEUs): \_\_\_\_\_ Phone #: \_\_\_\_\_

### Payment Information

Payment by:  Check  Credit Card For Credit Card:  Visa  Mastercard  
Number: \_\_\_\_\_ 3 Digit Security Code: \_\_\_\_\_  
Billing Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Mail completed form with payment to:

Home Instead Senior Care • 70 Washington St., Ste. 305 • Oakland, CA 94607



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