



COST PER PERSON \$100
VOLUNTEER RATE \$35

REGISTER NOW TO CONFIRM YOUR SPOT!
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*Enrollment will be confirmed upon receipt of Registration Form and Payment.

Core 1 is a 30-hour program that provides a basic introduction to hospice and palliative care for professionals, volunteers, and caregivers. Participants will learn about, discuss, and participate in activities including personal perspectives, communication skills, spirituality, grief, caregiver care, pain and symptom management, family dynamics, culture, and ethics.

CORE 1 NORTH YORK	CORE 1 RICHMOND HILL
Thursday Evening 6:30 pm – 9:30 pm	Monday Afternoon 1:00 pm – 4:00 pm
January 24 th , 31 st February 7 th , 14 th , 21 st , 28 th March 7 th , 21 st , 14 th and 28 th	January 14 th , 21 st , 28 th February 4 th , 11 th , 25 th March 4 th , 11 th , 18 th and 25 th
Better Living Community Centre 1 Overland Dr. M3C 2C3	Richmond Hill Holiday Inn Express 10 East Pearce St, Richmond Hill, ON L4B 0A8

For a complete listing of session dates and course content please visit www.palcarenetwork.org/education



PalCare Core 1 training meets training standards set by Hospice Palliative Care Ontario (HPCO)



WINTER 2019 REGISTRATION FORM

CORE 1 - Introduction to Core Concepts In Hospice Palliative Care

Participant Information

Name:

First Name

Last Name

Address:

Street

City

Postal Code

Phone:

Email:

Education Sessions

Please indicate the session you are registering for:

NORTH YORK

THURSDAY 6:30 PM – 9:30 PM
January 24/19 – March 28/19

Better Living Community Centre
 1 Overland Dr.
 M3C 2C3

RICHMOND HILL

MONDAY 1:00 PM – 4:00 PM
January 14/19 – March 25/19
 *No Class February 18/19 (Family Day)

Richmond Hill Holiday Inn Express
 10 East Pearce St, Richmond Hill, ON
 L4B 0A8

Complete course outline and session details at www.palcarenetwork.org. Please contact education@palcarenetwork.org directly to make arrangements to attend alternate locations for individual sessions.

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Payments by **CHEQUE** are payable to **Margaret Bahen Hospice for York Region**. Please mail completed form and cheque to **Margaret Bahen Hospice for York Region, 653 Queen Street, Newmarket, Ontario L3Y 2J1**.

Payments made by **CREDIT CARD** may be mailed or faxed to **905-967-0018**

Type of Card:   Amount: _____

Name of Cardholder: _____

Card Number: _____ Security Code: _____
*3 Digit Code on Back of Card

Expiry Date: _____ Signature: _____