



SOHN MIDWINTER BOARD MEETING GUEST ATTENDEE

Name: _____ Credentials: _____

Address: _____

Daytime phone number: _____ E-mail: _____

Number of years as a SOHN member: _____

Involvement in SOHN Activities* (e.g. Chapter member, SIGs, Committees, Speaker):

Statement of interest to serve as a Guest Attendee at the Midwinter Board Meeting (MWBM).
Be sure to explain how your participation at the MWBM will prepare you to for your future
goals within SOHN*.

Dates of Midwinter Board Meeting: **dates not yet determined**

I understand that if selected I will be available to attend the MWBM on the dates indicated on
this application.

SIGNATURE: _____

ENDORSEMENT SIGNATURE: _____

(Chapter Officer, Committee Chairperson, or Board of Director)

*Please use additional pages if needed.