



## Kentucky Medicaid Summer 2010 Registration Form

Please indicate below which seminar(s) you will be attending.

Date	Location	Attending
August 27, 2010	Murray State – Paducah Campus 3000 Irvin Cobb Drive, Room 112 Paducah, KY 42001	
August 31, 2010	Jenny Wiley State Park Wilkinson Stumbo Convention Center 75 Theatre Court, Cherokee Room Prestonsburg, KY 41653	
September 2, 2010	Kentucky Transportation Cabinet Building Conference Center, Room 117 20 Mero Street Frankfort, KY 40622	
September 8, 2010	Cave City Convention Center 502 Mammoth Cave Street, West Hall A Cave City, KY 42127	
September 14, 2010	Boone County Library 7425 U.S. 42 Florence, KY 41042	

Please complete the following information.

Number of Attendees: \_\_\_\_\_

Contact Name(s): \_\_\_\_\_

\_\_\_\_\_

Representing: \_\_\_\_\_

\_\_\_\_\_

Email(s): \_\_\_\_\_

\_\_\_\_\_

Fax Number(s): \_\_\_\_\_

\_\_\_\_\_

Fax form to (502) 223-6651 or email to [kyproviders@magellanhealth.com](mailto:kyproviders@magellanhealth.com).