



NETWORK OF CARE GETTING CONNECTED TO eRECOVERY

[INSERT DATE]
[INSERT TIME]
[Insert event place]
[Insert address]

www.ohio.networkofcare.org

Network of Care for Behavioral Health is an online resource for individuals, families and agencies concerned with mental and emotional wellness, substance abuse and developmental disabilities. It offers critical knowledge, communication and advocacy tools for those navigating the system.

This training event will provide the information and resources to educate individuals and groups in our own communities about the exciting features and benefits of Network of Care. The success of Network of Care in Ohio will really depend on all of us who have been trained about its many facets to share that information in both formal and informal settings about how this new Web site can help consumers, families, and behavioral health professionals.

PARTICIPANT REGISTRATION

Registration Submission: This training is **free**; however, attendance is limited, so please don't delay. Forms must be submitted **by [insert date]** to guarantee participation in the Network of Care training.

Name:	
Agency/Organization:	
Street Address:	
City/State:	Zip Code:
Phone #:	Fax #:
County:	Email:
Special Needs (if applicable):	
Participant Affiliation(s): (Check all that apply)	
<input type="checkbox"/> State Department	<input type="checkbox"/> OAMH member
<input type="checkbox"/> ADAMH/ADAS/CMH Board	<input type="checkbox"/> BH Provider
<input type="checkbox"/> Statewide Association	<input type="checkbox"/> NAMI member
<input type="checkbox"/> Other (Specify) _____	

Please complete and mail, fax or email registration **BY [insert date]** and return it to:

[insert contact information]