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# Neurovascular Registered Nurse Review Course

# Host Site Agreement for Individual Payment

The NVRN Board Certification (NVRN-BC©) is a rigorous credential signifying expertise in acute stroke clinical practice. This two (2) day NVRN Review Course to Registered Nurses (RN’s) is designed to improve neurovascular nursing expertise at the bedside for stroke patients.

### Proposed Course Dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Course Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Course Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Please indicate the number of participants expected to attend: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Course Format and Marketing**

The Host Organizer is allowed to use the ANVC logo in promotional materials to advertise the course and is encouraged to display it prominently on all materials produced. Logos will be distributed via email upon countersignature of this agreement. Any materials promoting the course will need approval from ANVC prior to distribution. This includes flyers, web pages, printed publications, or any other documents produced for event. In addition ACE Continuing Education hours will be displayed per ANVC instructions.

Review Course Agenda - Day 1 & 2

0730 - 0800 Registration0800 - 1000 First Morning Session1000 - 1015 Break1015 - 1145 Second Morning Session1145 - 1245 Lunch1245 - 1415 First Afternoon Session1415 - 1430 Break1430 - 1600 Second Afternoon Session

No reproductions of lectures of any kind are permitted. ANVC remains sole owner of all lectures offered during the Review Course.

**Host Organizer Responsibilities**

The Host Organizer/Representative is defined as the person or organization financially responsible for hosting the NVRN course. The Hosting Organizer shall:

* Promote the course within their hospital, examples: distribution of course flyer;
* Provide a secure meeting space for the duration of the course and will make reasonable accommodations for all participants;
* Provide all necessary audio-visual (A/V) equipment (e.g., screen, projector, lapel or hand held microphone, and internet access) including on-site assistance to help with AV throughout the program (NOTE: ANVC will provide the computer);
* Provide breakfast and lunch facilities or food service for the two day review course;
* Communicate and ensure that ALL participants apply for the review course through [www.anvc.org](http://www.anvc.org). This guarantees participants receive their certificate of Continuing Education Units; and
* Return this MOU with the required signatures within 15 days of its receipt.

The Host Organizer agrees to release and hold harmless the ANVC and/or other facilities utilized to provide the meeting from any and all liability for damage or loss to his/her goods or property during the meeting. The Host Organizer further agrees to indemnify and hold harmless the ANVC from any claim, demand, loss, liability damage or expense arising in any way from the course facility, course participants or services provided by the Presenter.

**ANVC Responsibilities**

ANVC will:

* Provide ANVC web site availability and assistance at [www.anvc.org](http://www.anvc.org) for participants to register for the Review Course.
* Provide one or two instructors for the two (2) day NVRN Review Course; and
* Provide Review Course participants with Continuing Contact Unit certificates from The Academy for Continuing Education (ACE), Health Solutions, Arizona State University as an approved provider of continuing nursing education by the Arizona Nurses’ Association, an accredited approver by the American Nurses Credentialing Center’s Commission on Accreditation for thirteen (13) credits.

# Cancellation & Amendments

This agreement may be cancelled or terminated without cause by either party by giving (30) calendar days advance written notice to the other party. Such notification shall state the effective date of termination or cancellation.

Any and all amendments must be made in writing and must be agreed to and executed by the parties before becoming effective.

**Effective Date and Signature**

Please sign and scan this Agreement to info@anvc.org or fax to 952-545-6073. If you have additional questions please call JoAnn Taie at 952-646-2013.

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ANVC Authorized Signature Host Organization Authorized Signature Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_