

# Province-Wide Rounds: ATTENDANCE SIGN-IN SHEET

*"Sleep, RLS/PLMS, Narcolepsy Cataplexy"*

5<sup>th</sup> February 2016

NOTE: A sign-in sheet is required if you wish to collect CME Credit(s). Note, you must sign and print your name and fax or e-mail CLEARLY in order for us to keep proper records.

**Please fax form back to Elsie Cabrera AT 416-603-5292.** Thank you!!

NAME (Please Print your full name <u>clearly</u> )	SIGNATURE	CME CREDIT		Fax # or E-mail
		Yes	No	

Photocopy additional forms as necessary