

**Handling Mental Illness in the TB Patient**  
**Heartland National TB Center**  
*2303 SE Military Drive*  
*San Antonio, Texas 78223*  
**Participant Sign-In Sheet**  
**March 25, 2010**

Printed Name with Credentials	Signature	Agency	State	Email Address (please print)

GROUP Leader Name & phone number: \_\_\_\_\_

Please print legibly where indicated. Once completed, make a copy to keep as back-up and mail the original to Heartland.

Please mail this **original signed** form to: **Heartland National TB Center c/o Mary Long 2303 SE Military Drive, San Antonio, Texas 78223**  
**MUST be mailed by April 12, 2010.**