



Web: [www.deconidi.ie](http://www.deconidi.ie)  
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Chairperson: Tony McLoughlin  
Mater Private, Cork

Vice-Chairperson: Hannah Mc Mahon  
Cappagh Hospital, Dublin

Treasurer: Patricia Doheny  
Ballyragget, Co. Kilkenny

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Naas General Hospital

Andrew Smith  
St. James Hospital, Dublin

Suzanne Hannon  
Bon Secours, Glasnevin

## Irish Decontamination Institute Annual Conference 2016

### "Decontamination Best Practice - inside and outside the CDU"



Irish Decontamination Institute  
Annual Conference

Irish Decontamination  
Institute  
Annual Conference  
2016



10th & 11th Nov 2016  
Silver Springs Hotel  
Cork



## IDI Annual Conference 2016

I would like to take this opportunity on behalf of the Irish Decontamination Institute to invite you to attend the forthcoming IDI Annual Conference 2016.

If you require further information please contact

Tony Mc Loughlin, IDI Chairperson  
[tony.mcloughlin@deconidi.ie](mailto:tony.mcloughlin@deconidi.ie)

or

Tracey Scott, Delegate Registrar  
[tracey.scott@deconidi.ie](mailto:tracey.scott@deconidi.ie)

We look forward to your participation at this year's conference and appreciate your continued support.

Kind Regards

Tony Mc Loughlin  
Chairperson  
Irish Decontamination Institute

Conference details are available on the IDI homepage:  
[www.deconidi.ie](http://www.deconidi.ie)

Closing Date for registration (with full payment)

**Friday 11th November 2016**

**Individual delegate conference registration cost:**

IDI Members: €80

IDI Non Members: €100

**There is a special early bird registration rate for IDI Members**



**€65 paid in full by 1st September 2016**

**Completed application forms should be returned with payment (draft/cheque payable to IDI) to:**

Tracey Scott  
E-mail: [tracey.scott@deconidi.ie](mailto:tracey.scott@deconidi.ie)

or

Patricia Doheny  
Ballyragget, Co. Kilkenny

### REGISTRATION FORM

Name: \_\_\_\_\_

Organisation: \_\_\_\_\_

Position: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Postal Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

IDI Member:  YES  NO

I wish to register for the IDI Conference 2016.

I enclose payment of € \_\_\_\_\_

Signature: \_\_\_\_\_

**I wish to register for the IDI pre conference gathering Thursday 10th Nov 2016 (8.30PM):**

YES  NO

Official Use only:

Full payment received: \_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_