



AGENDA

ANFP | Kentucky Chapter | Bi-Annual Conference

October 16, 2024

Register: 8:30a – 9:00am CST

Meeting: 9:00a – 3:30pm CST

Meeting called by: Association of Nutrition and Foodservice Professionals, KY Chapter

Attire: Business Casual

Location: Treyton Oak Towers
211 W Oak St, Louisville, KY 40203

8:30am – 9:00am **Registration, Meet & Greet and light breakfast/beverages**

9:00am – 10:00am **Residents Menu's and Diet's (1 CE)**
Whitney Robert | MPH, RD, LD

10:00am – 11:00am **Menu Trends (1 CE)**
Tim Copeland | With HPSI

11:00am – 12:00pm **What Chemical kills what viruses (1 Sanitation CE)**
Larry Himmelheber | Kenway

12:00pm – 1:00pm **Membership working Lunch Provided by Treyton Oak**
Active Shooter in the workplace (1 CE)
Tyler Jackson | Security with Owensboro Health

1:00pm – 2:00pm **Health Inspection Compliance (1 Sanitation CE)**
Grace Ellis | Metro Louisville Health Auditor

2:00pm – 3:00pm **Holiday Cooking (1 CE)**
Brien Mathews | Executive Chef at Owensboro Health

3:00pm – 3:30p **Installation of New Officer's and Closing Remarks**
Chapter Officers | ANFP, KY Chapter

Additional Instructions:

Pre-registration: \$40.00; Registration upon arrival: \$50.00

*Student guests and Facility Administrators attend free

**Pre-registration payment information and form included below

Conference continuing education hours applied:

General CE hours = 4 Sanitation CE hours = 1

*Door prizes available to attendees throughout the day

*Guests must sign-in and sign-out at conclusion of conference to receive Certificate of Attendance and CE credits.

KY Chapter ANFP contacts for more information:

- Larry Little, President
 - 270 417-6414 larry.little@owensborohealth.org
- Shirley Elder, Treasurer
 - 502-802-9840 shirley.elder.1956@gmail.com

PRE-REGISTRATION FORM

To pre-register, please complete this form, detach from the agenda and mail (with payment) to:

Ms. Shirley Elder

911 Ormsby Lane Apt.214

Louisville, KY 40242

*Checks payable to "ANFP, Kentucky Chapter"

Name: _____ Email: _____

Amount Enclosed: \$ _____ Number attending: _____

Facility: _____ ANFP Member ID#: _____