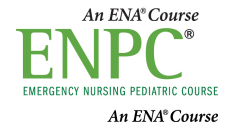




Rio Bravo  
Chachalacas Chapter

# 2027 TNCC & ENPC Challenger Course

## CHALLENGER COURSE REGISTRATION FORM



TNCC and ENPC Challenger courses offer experienced RNs a fast-track option to earn or renew 4-year provider verification. Complete required precourse modules and skills and written testing without attending live lectures.

**Course Sponsor:** ENA Chapter 438 - Rio Bravo Chachalacas  
**Course Director:** Christine Chizek, MEd, BSN, RN, NPD-BC, CCRN, CEN, TCRN, CPEN  
**Course Fee:** \$275 per course (includes eBook; printed manual upon request)

### COMPLETE THE CHALLENGER COURSE

1. Complete the required precourse modules before skills testing (allow 60-90 minutes).
2. Complete TNP (TNCC) or PNP (ENPC) skills testing virtually (in-person upon request). Allow 45-60 minutes. Schedule your session with your instructor after completing the modules.
3. After passing skills testing, complete the course evaluation, then the online exam. You have 7 days to complete the exam, with 2 attempts and 2 hours per attempt.

**Virtual testing requires a computer or tablet with a camera; a phone cannot be used.**

### HOW TO REGISTER

Full payment is due upon registration. Choose one of the following:

#### 1. REGISTER & PAY ONLINE

Securely pay via PayPal: [riobravochachalacas.com/class-registration](https://riobravochachalacas.com/class-registration)

#### 2. REGISTER & PAY BY CHECK

Mail this form and a check payable to ENA Chapter 438 to:  
ENA Chapter 438, PO Box 1875, Los Fresnos, Texas 78566

Refund Policy: Cancellations received at least 10 days before class receive a refund of monies paid minus \$90. Printed provider manuals and eBooks are non-returnable and non-refundable. No refunds for cancellations less than 10 days before the live course, no-shows, or not completing the course. (Effective 09/09/23.) The refund policy, course dates and class locations are subject to change.

### COURSE SELECTION AND PARTICIPANT INFORMATION

**Course (select one):** ☐ TNCC 9th Edition ☐ ENPC 7th Edition  
**Manual (select one):** ☒ eBook ☐ Printed manual upon request  
**Skills testing:** ☒ Virtual ☐ In-person upon request

**When do you need TNCC/ENPC by?**

**Name:**

**Mailing Address:**

**City / State / ZIP:**

**Email (required):**

**Phone #:**

**Hospital & Dept. Name:**

ADA Statement: In accordance with the ADA, please advise us if you have any disability that requires special materials and/or services so that appropriate personnel can be advised.

Questions? Chris Chizek | 956-778-9110 | [Rio.Bravo.Chachalacas@gmail.com](mailto:Rio.Bravo.Chachalacas@gmail.com)  
[www.riobravochachalacas.com/education](https://www.riobravochachalacas.com/education)