# EVOLUTIONS WORKSHOP

Join us in Omaha, Nebraska! We offer two courses during our Evolutions Workshop, Employee Relations & Optical Enhancement.

## FEBRUARY 5TH-6TH

### EMPLOYEE RELATIONS

Elevate your leadership skills by cultivating the culture of a thriving workplace.

- Recruit and train quality candidates
- Team management and development

### OPTICAL ENHANCEMENT

ABO accredited workshop centered on optimizing your optical product and efficiency.

- Frame board management
- Patient prescription retention

**Register Now**

# Evolutions

## Employee Relations

The popular Employee Relations Training is perfect for any team member in a leadership role! We discuss everything from recruiting, hiring, and training quality candidates, to goal setting, one-on-ones, and performance evaluations. Your leaders will benefit from the conversation and tools provided during this workshop which are necessary to create a culture of accountability within your practice.

- Build a Quality Team
- Develop your Team
- Communication and Goal Setting
- Coaching vs. Counseling
- Develop and Deliver Performance Evaluations

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## Optical Enhancement - ABO ACCREDITED (8 Hours)

Optical Enhancement is a dedicated workshop for advancing your optical performance. This course is tailored for Optical Team Leads and Team Members seeking optical expertise and professional success.

Beyond traditional approaches, this course will review how to elevate product value, enhance patient communication and education throughout the eye wear sales process. Participants will engage in discussions on frame board management and vendor relations.By implementing targeted strategies, attendees will gain insights into reducing costs and optimising optical revenue and overall patient experience.

- Frame Board Management & Vendor Relations
- Tools for a More Efficient Optical
- Patient Prescription Retention
- Frame Styling
- Reducing Remakes
- Proper Dispense Techniques

# EVOLUTIONS REGISTRATION FORM ACQUIOS ADVISORS

***Please complete this form and email to info@acquios.com***

Doctor's Name: _____ Practice Name: _____

Contact Person: _____ Contact Number: _____

## ***Sign-Up Information:***

- We will be hosting our **Insurance & Billing**, **Optical Enhancement**, and **Employee Relations Training** simultaneously on **2/5/2027 and 2/6/2027 from 9 am to 5 pm Central Time in Omaha, NE**.
- Attending virtually will include LIVE access to the training via Virtual Meeting format and an electronic training packet.
- Attending in person will include real-time interaction with our team and others in attendance, a packet of training materials, lunch on both days, and the experience of networking with other professionals.
- **Insurance & Billing is In-Person Only.**

**Tell us how many will be in attendance and which format you will attend:**

☐**Insurance & Billing** ***# of attendees*** _____***$799 for one attendee and $599 for each additional attendee***

Name: _____
Name: _____
Name: _____
Name: _____
Name: _____

☐**HR/Employee Relations** ***# of attendees*** _____ ***$250 for each attendee***

Name: _____ □ Virtual □ In-Person
Name: _____ □ Virtual □ In-Person
Name: _____ □ Virtual □ In-Person
Name: _____ □ Virtual □ In-Person
Name: _____ □ Virtual □ In-Person

☐**Optical Enhancement** ***# of attendees*** _____ ***$250 for each attendee***

Name: _____ ABO Certification: Y/N □ Virtual □ In-Person
Name: _____ ABO Certification: Y/N □ Virtual □ In-Person
Name: _____ ABO Certification: Y/N □ Virtual □ In-Person
Name: _____ ABO Certification: Y/N □ Virtual □ In-Person
Name: _____ ABO Certification: Y/N □ Virtual □ In-Person

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## ***Payment Options*** ***(choose one):***

□ ***Visa*** □ ***MasterCard*** □ ***Discover*** □ ***American Express*** □ ***Check***

Card Number: _____| Exp. Date: _____| CVV: _____

Name as Appears on Card: _____

Billing Address: _____

**Mail Check:**

**Acquios Advisors**
**4611 S 96th St., Ste 260**
**Omaha, NE 68127**

Signature: _____Date: _____

***Total Amount to be Charged or mailed via Check:*** **$**_____

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