

Pre-registrations must be received by **11:59pm August 9, 2024** or on site rates apply

For **DISCOUNTED** rates for single/double rooms, make a room reservation for the event at TheNationalChiro.com or call directly at 1-800-233-1234; mention Group Code G-ASJB and that you are a Florida Chiropractic Attendee, when making a reservation.

We're sorry ... but we cannot accept credit cards via telephone for registration. You MUST send us your form and check via mail or register with us online at TheNationalChiro.com before 11:59pm August 9, 2024 via credit card.

CANCELLATION POLICY: Cancellations received by August 9, 2024, will receive a refund of The National Convention & Expo fees, less a \$30 processing charge per registrant. Cancellations after August 9, 2024, will not be refunded. Family Pass/Expo Pass is not refundable nor transferable.

REGISTRATION CATEGORY	PRE-CONFERENCE Received by 11:59pm 8/9/24	ON SITE THURSDAY/FRIDAY/ SATURDAY ONLY
DC REGISTRATION IN PERSON CONVENTION (UP TO 20 HOURS C.E. + EXPO ACCESS)		
FCA Member Student	FREE!	FREE!
*FCA Member 1st Year DC	FREE!	FREE!
FCA Member DC	\$275	\$350
Non-member DC	\$450	\$525
FCA Member DC Up to 16 In-Person CE hours + 4 On Demand	\$320	\$395
Non-Member DC Up to 16 In-Person CE hours + 4 On Demand	\$525	\$600
FCA Member First-Year Florida DC Up to 16 In-Person CE hours + 4 On Demand	\$45	\$45
ADDITIONAL TRAINING OPTIONS		
DABCI MODULE I - 12 hours Training	No additional charge	
ACNB - 4 hours training	Add on price of \$120	
CBD certification Part 1 - 4 hours training	Add on price of \$125	
CBD certification Part 2-3 - 8 hours training	Add on price of \$250	
Speak Up And Lead Training - 6 hours training	Add on price of \$295	
Human Metabolic Research & Development Organization Certification - 6 hours	Add on price of \$150	
It's Time to Go M.A.D. (Make a Difference) - 4 hours training/CA	Add on price of \$49	
Dry Needling - Foundation Course 27 hours	Add on price of \$1,000	
Mental Health Gym for the Brain Workshop	Add on price of \$125	
BRING YOUR OFFICE STAFF		
FCA Member DC's staff - CCPAs (up to 12 hours + Expo), CAs (class admission + Expo), Other Staff	\$60	\$80
Non-member DC's staff - CA/CCPA/Other Staff	\$95	\$110
CA/CCPA who holds his/her own membership	\$50	\$70
OTHER REGISTRATION		
Other Allied Health Care Practitioners (AP/DOM/LAc, DO, MD, ND, PhD, RPH, guests) Allied Health NOT submitted for CEU approval.	\$200	\$275
3-Day EXPO PASS ONLY (No class admittance or CE included!)		
FCA Member DC or Staff	\$35	\$50
FCA Non-member DC or Staff	\$50	\$60
Family Pass	\$20	\$20

YOUR IN-PERSON CONVENTION REGISTRATION ADMITS YOU INTO OUR EXHIBIT SHOW FLOOR!

THE NATIONAL 2024 REGISTRATION FORM

..... You may only register one (1) doctor looking to acquire CE per registration form

IN CASE OF AN AUDIT, ALL OFFICE CONTACT INFO REQUIRED FOR REGISTRATION

Your phone and email information will be accessible by scanning your badge **only to the exhibitors that you allow to scan your badge.** The FCA does not otherwise release this information to vendors. Check here to opt out of this convenient service that gives you control.

BADGE INFO

Name (first, last) _____

Mailing Address _____

City/State/Zip _____

E-mail _____

Office Phone _____ Fax _____ Cell Phone _____

I am a: DC FL 1st-Year DC STUDENT DC License # (CH) _____

REGISTER AS - Please enter appropriate fees from accompanying registration info page and total at the bottom

In-Person (up to 20 hours CE) + Expo Combo (up to 16 hours CE live + 4 hours on demand) + Expo \$ _____

Diplomate fee to cover maintenance of transcripts. Options are only offered to DC's attending in person for CE's.

ADDTL TRAININGS

Internist Diplomate Courses (DABCI) Training \$ FREE

ACNB \$ _____

CBD certification Part 1 \$ _____

CBD certification Part 2-3 \$ _____

Speak Up And Lead Training \$ _____

Human Metabolic Research & Development Organization Certification \$ _____

It's Time to Go M.A.D. (Make a Difference) \$ _____

Dry Needling \$ _____

Mental Health Gym for the Brain Workshop \$ _____

STAFF DISCOUNT SPECIAL! BRING YOUR ENTIRE STAFF!

CAs and CCPAs registering with your doctor! Includes admission to classes and expo areas.

ADDITIONAL STAFF

Staff Member #1 - Name: (first, last) _____ \$ _____

CCPA CI# _____ CA _____ Other

Staff Member #2 - Name: (first, last) _____ \$ _____

CCPA CI# _____ CA _____ Other

Staff Member #3 - Name: (first, last) _____ \$ _____

CCPA CI# _____ CA _____ Other

FL License AP/DOM/LAC Other Allied Health Care Practitioners (DO, MD, ND, PhD, RPH, guests) -

Name: (first, last) _____ \$ _____

Degree/Title: _____ State _____

EXPO

3-Day Expo ONLY Pass - (Name of DC needed if different from above. Unless specified, address above will be used.)

Name: (first, last) _____ \$ _____

FAMILY

Family Passes* with doctor's registration (*must be immediate family)

Full Name #1 _____ Relationship _____ \$ _____

Full Name #2 _____ Relationship _____ \$ _____

ChiroPAC support! I want to support ChiroPAC NOW and have added \$ _____ to my registration. PAC \$ _____

Please forward these dollars to ChiroPAC.

Foundation Support! I want to support Florida Chiropractic Foundation NOW and have added \$ _____ FCF \$ _____

to my registration. Please forward these dollars to FCF.

Your registration fee includes admission to all educational programs, exposition, morning coffee, afternoon breaks, as well as sponsored lunches and receptions. Make checks payable to Florida Chiropractic Association (FCA). Please return this form with payment to: Florida Chiropractic Assn., PO Box 783397, Winter Garden, FL 34778 (407) 654-3225 or register via our website: www.TheNationalChiro.com.

TOTAL _____

BONUS! I would like to receive a complimentary subscription to Chiropractic Economics Magazine!