



IN-PERSON REGISTRATION

Multiple rooming options available for this hotel. Book now at TheNationalChiro.com/SW

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.

You may only register 1 DC per registration form, that is looking to acquire Continuing Education credit.

Full Name DC License # (CH)

School You Attended Mailing Address

City State Zip

Cell Phone Email

Office Phone Fax

I am a DC FL 1st-Year DC Student Other Allied Practitioner

YES! I would like important class and attendance reminders texted to me while attending this event.*

*Terms of Use: By agreeing to the above you will receive notices regarding convention-related information at this event. This number will not be used for messaging in any other regard. You may discontinue messaging by replying with STOP at any time.
*By participation in this event, FCA may display and use any photography or videography captured at the event for advertising, display, website and internet promotion at our discretion.

PRE-REGISTRATIONS MUST BE RECEIVED BY NOVEMBER 7TH, 2025 OR CONFERENCE RATES APPLY

PRE-CONFERENCE
Received by
11/7/25

CONFERENCE RATE
After
11/7/25

		PRE-CONFERENCE Received by 11/7/25	CONFERENCE RATE After 11/7/25	
CE + EXPO	<input type="checkbox"/> FCA Member DC (up to 20 CE hours in-person)	285	360	\$ ____
	<input type="checkbox"/> Non-Member DC (up to 20 CE hours in-person)	460	535	\$ ____
	<input type="checkbox"/> FCA Member First-Year Florida DC (up to 20 CE hours in-person)	FREE!	FREE!	FREE!
	<input type="checkbox"/> FCA Member Student	FREE!	FREE!	FREE!
	<input type="checkbox"/> COMBO: FCA Member DC In-Person (up to 16 CE hours) + On-Demand (4 hours)	330	405	\$ ____
	<input type="checkbox"/> COMBO: Non-Member DC In-Person (up to 16 CE hours) + On-Demand (4 hours)	535	610	\$ ____
	<input type="checkbox"/> COMBO: FCA Member First-Year Florida DC In-Person (up to 16 CE hours) + On-Demand (4 hours)	55	55	\$ ____
ADD-ON TRAINING	<input type="checkbox"/> Dry Needling Foundation Course (27 hours)	1,000	1,000	\$ ____
	<input type="checkbox"/> Federal Workers Compensation Program (4 hours)	300	300	\$ ____
	<input type="checkbox"/> The Professional Baseball Chiropractic Society for DC's	175	175	\$ ____
	<input type="checkbox"/> The Professional Baseball Chiropractic Society for Baseball Society students	FREE!	FREE!	\$ ____
EXPO	<input type="checkbox"/> 2-Day Expo Pass (No Class/CE) - FCA Member DC - Expo Pass Passes are non-refundable nor transferrable.	20	20	\$ ____
	<input type="checkbox"/> 2-Day Expo Pass (No Class/CE) - Non-Member DC - Expo Pass	35	35	\$ ____
OFFICE STAFF	<input type="checkbox"/> FCA Member DC's Staff - CCPA (up to 12 hours)/CA/Other Staff/Guest	70	90	\$ ____
	<input type="checkbox"/> Non-Member DC's Staff - CCPA (up to 12 hours)/CA/Other Staff/Guest	105	125	\$ ____
	<input type="checkbox"/> Other Allied Healthcare Practitioners (DO, MD, ND, PhD, RPH, AP/DOM/LAC, guests) Allied Health NOT submitted for CEU approval	200	275	\$ ____
	Staff Member #1: Full Name <input type="text"/> Email <input type="text"/> CCPA CI# <input type="text"/> <input type="checkbox"/> Other Staff/Guest			\$ ____
Staff Member #2: Full Name <input type="text"/> Email <input type="text"/> CCPA CI# <input type="text"/> <input type="checkbox"/> Other Staff/Guest			\$ ____	
FAMILY	With doctor registration, 1 non-DC family pass is only \$20. No class attendance. *Non-refundable nor transferrable.			\$20
	Full Name <input type="text"/> Relationship <input type="text"/>			TOTAL: \$ ____

Bonus! You will automatically receive a complimentary subscription to Chiropractics Economic Magazine.
 Check this box to opt out.

Your registration fee includes admission to all educational programs, exposition, morning and afternoon breaks, Saturday Presidential Reception and complimentary daily refreshments in exhibit areas. **CHECKS MADE 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: TheNationalChiro.com/SW.
Cancellation Policy: Cancellations received by Friday, 11/7/25 will be refunded minus a \$30 processing fee per registrant. No refunds for cancellations after 11/7/25. A one-time transfer to a convention in 2026 is available if requested within 2 weeks post-event. Family/Expo Passes are non-refundable and non-transferable.
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/SW via credit card.
*Any net revenues from FCA events are re-invested in the profession for your benefit rather than for personal gain.