



## NUCCA 2024 Fall Conference Minneapolis, MN: November 7-9, 2024

---

### **DOCTORS:**

- \$545 Graduate Doctors (In practice < 2 years)
- \$695 Established Doctors (In practice 2+ years)
- I have a Gregory Circle or package membership. My conference fees are included in my membership dues.

### **NON-MEMBER DOCTORS:**

- \$895 Non-Member Doctor

### **STUDENTS:**

- I am a student package member; my conference fees are included in my membership.
- \$245 - (Includes 2024 fall Conference + remainder of 2024 Student Membership)
- \$150 – Current Student Member Non-Package

#### *Complimentary Hotel Rooms*

- I would like to request a student hotel room.

*Hotel Room Policy:* NUCCA provides complimentary hotel rooms during the conference for students on Wednesday, Thursday, and Friday nights. Student rooms will have up to four students per room. No exceptions are able to be made at this time. If you have a specific rooming request, please email [info@nucca.org](mailto:info@nucca.org) with that specific information. We do our best to room students together from the same school; but please understand that is not always possible.

---

**Questions? Please contact NUCCA at: 952-564-3061 or email us at: [info@nucca.org](mailto:info@nucca.org)**

*Email your completed forms with credit card payment to [info@nucca.org](mailto:info@nucca.org). Paying by check? Mail your check along with this completed registration form to: NUCCA, 10700 W Hwy 55, Ste 275, Plymouth, MN 55441.*



# NUCCA 2024 Fall Conference

## Minneapolis, MN: November 7-9, 2024

---

### ADDITIONS:

- \$125 Career Fair
  - Students attend for free.
- \$65 Friday Evening Banquet (November 8)
  - Gregory Circle receive two tickets as part of their membership.
  - Students attend for free.

---

### ATTENDEE INFORMATION:

NAME \_\_\_\_\_

PRACTICE NAME / SCHOOL \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE/PROV \_\_\_\_\_ POSTAL/ZIP CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

DIETARY RESTRICTIONS: \_\_\_\_\_

STATE(S) AND LICENSE #(S) \_\_\_\_\_

*State + license number information required now to grant you CE credits*

WHERE DID YOU ATTEND CHIROPRACTIC COLLEGE? \_\_\_\_\_

NUCCA CERTIFICATION LEVEL:     N/A     LEVEL 1     LEVEL 2     LEVEL 3     BOARD CERTIFIED

IS THIS YOUR FIRST NUCCA CONFERENCE?

- Yes
- No

WHAT LEVEL OF CLASSES WILL YOU BE ATTENDING?

- Intro / Level 1
- Advanced / Levels 2 & 3

---

Questions? Please contact NUCCA at: 952-564-3061 or email us at: [info@nucca.org](mailto:info@nucca.org)

Email your completed forms with credit card payment to [info@nucca.org](mailto:info@nucca.org). Paying by check? Mail your check along with this completed registration form to: NUCCA, 10700 W Hwy 55, Ste 275, Plymouth, MN 55441.



# NUCCA 2024 Fall Conference

## Minneapolis, MN: November 7-9, 2024

---

### PAYMENT INFORMATION

- |                                     |   |
|-------------------------------------|---|
| <input type="checkbox"/> Visa       | <input type="checkbox"/> American Express |
| <input type="checkbox"/> MasterCard | <input type="checkbox"/> Check # _____    |

Name on Credit Card \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ CVV \_\_\_\_\_

---

### CONFERENCE REFUND / CREDIT POLICY

If purchased to attend the conference as a separate item (not included in membership fees) and full price is paid for the conference:

- With notice of at least 30 days, a refund will be given (less a \$50 administrative fee).
- If less than 30 days' notice, no refund.
- If less than 30 days' notice and the conference is missed due to a family or emergency issue, submit a request in writing to the NUCCA Board of Directors as to the reasons for not attending the conference. The Board may allow credit to be transferred as payment for the following conference. Rollovers are only permissible if due to extenuating circumstances and must be approved by the Board on a case-by-case basis.

### CONFERENCE ATTENDANCE / MEMBERSHIP POLICY

To be listed in the NUCCA directory a doctor must be a member in good standing of NUCCA and have attended at least one NUCCA Spring conference or NUCCA Fall conference during the preceding two calendar years.

---

Questions? Please contact NUCCA at: 952-564-3061 or email us at: [info@nucca.org](mailto:info@nucca.org)

Email your completed forms with credit card payment to [info@nucca.org](mailto:info@nucca.org). Paying by check? Mail your check along with this completed registration form to: NUCCA, 10700 W Hwy 55, Ste 275, Plymouth, MN 55441.