



# Attendee Registration Form

❖ **DC & ND: Earn Up To 15 CEU Hours!** ❖ **AC: Earn Up To 8 CEU Hours on Friday!** ❖

Select: Dr. / Mr. / Ms. / Mrs. Degree(s): \_\_\_\_\_ Year(s) of Graduation: \_\_\_\_\_

Name \_\_\_\_\_

Guest Name(s) \_\_\_\_\_

Select: Business / Home Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Anatomy Lab Session on (Friday Only):  Yes, please sign me up.  No, I will not be participating.

**CEU USE ONLY**

License # \_\_\_\_\_ State \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_

❖ **Registration Includes: CEU Hours for Approved States, Meals and Social Events.** ❖

<i>Alumni Association Member</i> Attendee Registration		FEE
<b>1 A.</b>	★ Best Value ★ – Save \$75 DC   ND - Friday & Saturday <i>Flexible track selection available. (AC on Fri. and DC   ND on Sat.)</i>	<input type="checkbox"/> \$350
	DC   ND - Single Day: Friday	<input type="checkbox"/> \$175
	DC   ND - Single Day: Saturday	<input type="checkbox"/> \$250
	AC - Single Day: Friday	<input type="checkbox"/> \$150

General Attendee Registration		FEE
<b>1 B.</b>	★ Best Value ★ – Save \$75 DC   ND - Friday & Saturday <i>Flexible track selection available. (AC on Fri. and DC   ND on Sat.)</i>	<input type="checkbox"/> \$450
	DC   ND - Single Day: Friday	<input type="checkbox"/> \$225
	DC   ND - Single Day: Saturday	<input type="checkbox"/> \$300
	AC - Single Day: Friday	<input type="checkbox"/> \$200

<i>Social Event Attendance ONLY</i>		FEE
<b>2.</b>	Celebrate 120 Years of National <i>Friday: 5pm to 7pm</i>	<input type="checkbox"/> \$45
	President's Luncheon <i>Saturday: 12:30pm to 2pm</i>	<input type="checkbox"/> \$35
	NUHS Cocktail Reception <i>Saturday: 5pm to 7:30pm</i>	<input type="checkbox"/> \$45

<b>4.</b>	<b>GRAND TOTAL</b>
	\$ _____

Guest <i>(Includes EXPO pass and Meals.)</i>		FEE
<b>3.</b>	Guest Pass - Friday	<input type="checkbox"/> \$25
	Guest Pass - Saturday	<input type="checkbox"/> \$50
	<b>Alumni Association Member Complimentary Guest</b>	<input type="checkbox"/> FREE

PAYMENT OPTIONS	
<i>Make Checks payable to National University of Health Sciences. American Express, VISA, MasterCard and Discover are accepted.</i>	
Credit Card Number _____	
Expiration Date _____	Security Code _____
Zip Code _____	
Signature _____	

**Return Form & Payment to:**  
 NUHS Alumni & Development Office  
 Address: 200 East Roosevelt Road, Lombard, IL 60148  
 Questions: Contact Us at 630-889-6702 or alumni@nuhs.edu

**Please keep in mind that no refunds can be given after May 1, 2026.**  
 Please Note: NUHS/Lincoln College reserves the right to adjust programs dates, locations, times, topic(s), speaker(s), etc. Only advanced registrants will be notified of any program adjustment or cancellation.