



Attendee Registration Form

Homecoming 2026: Friday, June 12 and Saturday, June 13

☸ **DC & ND: Earn Up To 15 CEU Hours!** ☸ **AC: Earn Up To 8 CEU Hours on Saturday!** ☸

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
1 A.	★ 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: Saturday	<input type="checkbox"/> \$150

General Attendee Registration		FEE
1 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: Saturday	<input type="checkbox"/> \$200

<i>Social Event Attendance ONLY</i>		FEE
2.	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

4.	GRAND TOTAL
	\$ _____

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

PAYMENT OPTIONS

*Make Checks payable to
National University of Health Sciences.
American Express, VISA, MasterCard
and Discover are accepted.*

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.