## Empower your Patient’s

## Las Vegas

## 10 Hours CE’s

**Saturday, December 5th, 2020**

**Social Distancing will apply, attendees must wear facial coverings.**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office Name and Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Office Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Office Fax Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_License # : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location: Reno Elks Lodge

597 Kumble Lane

Reno, NV 89509

Hours: 8:00 am to 6:00 pm

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| --- | --- |
| NCA Association Members  \_\_\_\_ $199.00 per Chiropractor  \_\_\_\_ $49.00 per Chiropractic Assistant/Staff | NCA Non Association Members  \_\_\_\_ $249.00 per Chiropractor  \_\_\_\_ $99.00 per Chiropractic Assistant/Staff |

**Amount Paid** $ \_\_\_\_\_\_\_\_\_\_\_

Credit Card # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Billing Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Security Code on back of CC: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please note we only accept **Visa or Mastercard**. If you are paying by Credit Card, please email this form to [nvchiroassoc@cs.com](mailto:nvchiroassoc@cs.com) and/or fax it over to 702-399-6671. If paying by check please mail to:

2700 E. Lake Mead Blvd. Ste # 10 North Las Vegas, NV 89030

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nevada Chiropractic Association 2700 E. Lake Mead Blvd Ste. # 10 North Las Vegas, NV 89030

Phone #: 233-2288 Fax # : 399-6671 Email Address: [nvchiroassoc@cs.com](mailto:nvchiroassoc@cs.com) Website: **nvchiroassoc.org**