



Please mail or fax your completed form, along with payment, to:

Palmer College of Chiropractic, Continuing Education and Events Department
 1000 Brady Street, Davenport, IA 52803
 Tel: (800) 452-5032 Fax: (563) 884-5103

(Please note that registrations can also be completed online at: www.palmer.edu/homecoming)

1. Identification (please type or print legibly)

Salutation (please check one): Dr. Mr. Ms. Mrs. Other: _____
 Suffix (please check all that apply): D.C. Ph.D. C.T. C.A. Other: _____

First Name	MI	Last Name	
E-mail Address (required)		Telephone	Fax
Mailing Address: <input type="checkbox"/> Home <input type="checkbox"/> Work	Apt.#/Suite	Billing Address	Apt.#/Suite
City	State/Province	City	State/Province
Country	Zip/Postal Code	Country	Zip/Postal Code
Chiropractic College	Graduation Year	States of Licensure and License Number	

Requests for reasonable accommodations for individuals with documented disabilities must be submitted no later than Apr. 20. Please call toll free (800) 452-5032 to make arrangements.

2. Registration

Registration fee includes: admission to all sessions, the exhibit area, a registration packet, continental breakfasts and lunch on Saturday. *Continuing education credit hours included. **DOES NOT include Saturday Night Gala.**
 Note - If a guest needs CE, they need to register as a Doctor of Chiropractic as guest fees DO NOT include CE.

	Early (by Apr. 20)	At the door (after Apr. 20)	Total
Doctor of Chiropractic* Current California Chiropractic Association Member or Current FOW Member	\$199	\$325	\$
Guest	\$125	\$200	\$
Sub-total:			\$

Please provide the full name of all the guests whom you are registering and have paid for above:

First Name	Last Name	First Name	Last Name
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I give permission for the college to post my name as attending Homecoming.

3. Additional Activities

Activity	Must be purchased by 6 p.m., Friday, May 5 (until sold out)	No. of tickets	Total per activity (price x no. of tickets)
Saturday Gala Dinner <u>ONLY</u>			
Meal Choice (please circle): Bassian Seared Rotisserie Chicken Halibut (GF)	Braised Brussel Sprout Stir-Fry (V/GF)	\$50	\$
Guests' Meal Choice (please circle): Bassian Seared Rotisserie Chicken Halibut (GF)	Braised Brussel Sprout Stir-Fry (V/GF)	\$60	\$
Subtotal:			\$

4. Hotel Reservations

Palmer College has a negotiated rate at the following hotel:

**Marriott Santa Clara
2700 Mission College Blvd.
Santa Clara, CA 95054**

Room rates are \$169 per night plus tax for single or double occupancy; subject to availability (May 3-7, 2018). To make reservations, please visit the Marriott Hotels website at www.marriott.com or call the Marriott Santa Clara directly at (800) 228-9290 or (408) 988-1500. Please mention "Palmer College of Chiropractic Homecoming" to receive this reduced rate. Room block and special rates will be released on April 20, 2018. Please make your reservation prior to April 20.

5. Registration Summary and Payment

Sub-total 1: Registration	\$
Sub-total 2: Additional Activities	\$
Grand Total	\$

Cancellation Policy

Full refunds, less a 25-percent administrative fee, will be made on all cancellations received by April 20, 2018. Refunds will not be considered for requests received after April 20, 2018.

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Method of Payment

- | | |
|---|-------------------------------------|
| <input type="checkbox"/> Cash | <input type="checkbox"/> Discover |
| <input type="checkbox"/> Check or Bank Draft (payable to Palmer College Homecoming) | <input type="checkbox"/> MasterCard |
| <input type="checkbox"/> American Express | <input type="checkbox"/> VISA |

Credit Card #

Expiration Date (Month/Year)

CVC

Cardholder Name

I hereby authorize Palmer College of Chiropractic to debit the grand total indicated above from my credit card and I acknowledge having read the cancellation policy.

Signature of cardholder

Date