



REGISTRATION FORM

Kansas City, MO
Oct. 1-4, 2022



ATTENDEE INFORMATION (REQUIRED FIELDS †)

† NCPA MEMBERSHIP NO.

† GRADUATION YEAR, IF STUDENT

† LAST NAME

† FIRST NAME

† NICKNAME FOR BADGE

† COMPANY/ORGANIZATION

† STREET ADDRESS

† CITY/STATE/ZIP

† DAYTIME PHONE

† FAX

† EMAIL

† EMERGENCY CONTACT NAME

† PHONE NUMBER

GUEST NAME OR TEAM MEMBER NAME(S)

† EMAIL

NICKNAME FOR BADGE

GUEST NAME OR TEAM MEMBER NAME(S)

† EMAIL

NICKNAME FOR BADGE

NAME OF PRIMARY BUYING GROUP/COOPERATIVE OR WHOLESALER

YES NO
Send additional information from exhibiting companies

Is this your first time attending convention?

METHOD OF PAYMENT (REQUIRED FIELDS †)

Convention Total: \$ _____ | Pre-convention Total: \$ _____

Enclosed check made payable to NCPA for \$ _____ (IN U.S. FUNDS, DRAWN ON A U.S. BANK)

Charge \$ _____ to my credit card (CARD WILL BE CHARGED IMMEDIATELY)

Visa MasterCard American Express Discover

† CARD NUMBER

† EXPIRATION DATE

† SECURITY CODE

† CARDHOLDER NAME (PLEASE PRINT)

MAIL TO:
NCPA, 100 Daingerfield Road,
Alexandria, Virginia 22314,
Attn: NCPA Conventions
.....
EMAIL: eva.jones@ncpa.org
.....
Questions about Registration?
Contact:
American Tradeshow Services
985/240-5511

Registration Fee Inclusions

Fees for the majority of registration categories include entrance to all business education, student programming, symposia meals, exhibit hall, opening night reception, continental breakfasts, exhibit hall reception and lunches, and Monday night dinner/dance. **Please note that fees for the Spouse/Guest and Support Staff registration categories do not include CE credits.*

Cancellation Policy

Cancellations must be submitted in writing and received by September 23, 2022 and are subject to a \$100 cancellation fee for each cancelled registration. Cancellations should be sent via email to Eva Jones, eva.jones@ncpa.org. Refunds will not be issued for "no show" registrants. Authorized refunds will be issued thirty (30) days after the close of the NCPA convention.

Liability Waiver and Convention Policies (Please read and sign)

I am fully aware of the risks of attending the NCPA 2022 Convention ("Activities"), including those associated with the COVID 19 pandemic, and I assume full responsibility for my own well-being and have chosen to participate in the NCPA 2022 Convention of my own free will. I forever release NCPA and any affiliated organizations, along with their respective board members, employees, volunteers, agents, attorneys, contractors, and representatives (collectively "Releasees") from any and all liabilities, causes of action, lawsuits, claims, demands, or damages of any kind whatsoever that I, my assignees, heirs, guardians, next of kin, spouse and

legal representatives now have, or may have in the future, for bodily injury, death, or property damage, related to (i) my participation in the Activities or presence on the site, (ii) the negligence or other acts of any Releasee, whether directly connected to the Activities or not, and however caused, and (iii) the condition of the site. I also agree that I, my assignees, heirs, guardians, next of kin, spouse and legal representatives will not make any claim against, sue, or attach the property of any Releasee in connection with any of the matters covered by the foregoing Release. Should they do so, I agree that they will be liable for paying the attorneys' fees and costs incurred by any Releasee who is successful in enforcing this Release.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND NCPA. I SIGN IT OF MY OWN FREE WILL.

CONSENT: I consent to be photographed and/or videographed and grant permission for 2022 convention photographs and/or videos to be used by NCPA staff for promotional purposes.

My signature below indicates that I have read, understand, and agree to abide by the liability waiver, all NCPA convention policies and the consent

SIGNATURE

DATE

2022 Annual Convention Rates

PLEASE CHECK YOUR CATEGORY OF CHOICE.

| Pharmacy Teams | Registration |
|--|----------------------------------|
| <input type="checkbox"/> Pharmacy Teams Registration— Members only (Up to 4 Owner/Managers, Staff Pharmacists and Technicians/Support Staff) | <input type="checkbox"/> \$2,675 |
| <input type="checkbox"/> One Additional Team Member | <input type="checkbox"/> \$750 |

NEW
THIS
YEAR

| Category | Registration | Onsite Starting 10/1 |
|---|----------------------------------|----------------------------------|
| <input type="checkbox"/> Pharmacist (Owner/Manager, Staff)—Member | <input type="checkbox"/> \$995 | <input type="checkbox"/> \$1095 |
| <input type="checkbox"/> Pharmacist (Owner/Manager, Staff)—Nonmember* | <input type="checkbox"/> \$1,500 | <input type="checkbox"/> \$1,600 |
| <input type="checkbox"/> Pharmacy Resident—Member | <input type="checkbox"/> \$590 | <input type="checkbox"/> \$640 |
| <input type="checkbox"/> Pharmacy Resident—Nonmember | <input type="checkbox"/> \$640 | <input type="checkbox"/> \$690 |
| <input type="checkbox"/> Pharmacy Technician/Support Staff—Member | <input type="checkbox"/> \$540 | <input type="checkbox"/> \$590 |
| <input type="checkbox"/> Pharmacy Technician/Support Staff—Nonmember | <input type="checkbox"/> \$610 | <input type="checkbox"/> \$660 |
| <input type="checkbox"/> Dean/Faculty Member (Please complete registration form) | <input type="checkbox"/> \$615 | <input type="checkbox"/> \$665 |
| <input type="checkbox"/> Student—Member | <input type="checkbox"/> \$315 | <input type="checkbox"/> \$340 |
| <input type="checkbox"/> Student—Nonmember* | <input type="checkbox"/> \$365 | <input type="checkbox"/> \$390 |
| <input type="checkbox"/> Non-Pharmacist Spouse/Guest | <input type="checkbox"/> \$769 | <input type="checkbox"/> \$819 |
| <input type="checkbox"/> Non-Pharmacist Support Staff—Member | <input type="checkbox"/> \$769 | <input type="checkbox"/> \$819 |
| <input type="checkbox"/> Non-Pharmacist Support Staff—Nonmember | <input type="checkbox"/> \$839 | <input type="checkbox"/> \$889 |
| One Day Registrant (per day) PHARMACISTS ONLY | | |
| <input type="checkbox"/> Member <input type="checkbox"/> Sat. <input type="checkbox"/> Sun. <input type="checkbox"/> Mon. <input type="checkbox"/> Tues. | <input type="checkbox"/> \$625 | <input type="checkbox"/> \$625 |
| <input type="checkbox"/> Nonmember <input type="checkbox"/> Sat. <input type="checkbox"/> Sun. <input type="checkbox"/> Mon. <input type="checkbox"/> Tues. | <input type="checkbox"/> \$785 | <input type="checkbox"/> \$785 |
| <input type="checkbox"/> Non-Exhibiting Representative—Member | <input type="checkbox"/> \$2,000 | <input type="checkbox"/> \$2,000 |
| <input type="checkbox"/> Non-Exhibiting Representative—Nonmember | <input type="checkbox"/> \$2,295 | <input type="checkbox"/> \$2,295 |

*Price includes NCPA Membership.

2022 Pre-convention Program Rates

PLEASE CHECK YOUR CATEGORY OF CHOICE.

PRE-CONVENTION REGISTRATION DEADLINE: September 21, 2022

| Program | Pre-convention Only Member Rate | Pre-convention Only Nonmember Rate |
|--|---|------------------------------------|
| <input type="checkbox"/> Pharmacy Ownership Workshop — 9/29 - 9/30 | <input type="checkbox"/> \$895 | <input type="checkbox"/> \$1,195* |
| <input type="checkbox"/> The Business of Long-Term Care Workshop — 9/29 - 9/30 | <input type="checkbox"/> \$845 LTC Division Member <input type="checkbox"/> \$995† | <input type="checkbox"/> \$1,295*† |
| <input type="checkbox"/> Creating Health: Pharmacist-Led Lifestyle and Weight Management — 9/30 | <input type="checkbox"/> \$595 | <input type="checkbox"/> \$795 |
| <input type="checkbox"/> Finding Your Way in the Specialty World Today — 9/30 | <input type="checkbox"/> \$295 | <input type="checkbox"/> \$495 |
| <input type="checkbox"/> Pharmacy-Based Point-of-Care Test & Treat National Certificate Program — 10/1 | <input type="checkbox"/> \$295 | <input type="checkbox"/> \$495 |
| <input type="checkbox"/> Implementing Chronic Care Management and Remote Patient Monitoring - 10/1 | <input type="checkbox"/> \$395 | <input type="checkbox"/> \$595 |

*Price includes NCPA Membership.

†Price includes LTC Division Membership.