

**Registration Form for NCS- ACOFP Annual Conference
at the Pinehurst Resort
August 11 – 13, 2023**



Name _____

Email _____

Select the Registration Fee Amount Below

Rates:	Payment Made by July 2	After July 2
NCOMA or NCS-ACOFP dues-paying member	\$475.00	\$525.00
Non- Member Physician	\$525.00	\$575.00
Active-Duty Military Physician (not a member)	\$275.00	\$325.00
Retired Physician	\$325.00	\$375.00
Student	\$35.00	\$45.00
Resident	\$75.00	\$100.00
Health Care Professional (PA, RN, FNP)	\$300.00	\$350.00
Guest (Friday evening reception only)	\$30.00	\$30.00

Total Amount Due for Conference \$ _____

Dietary Issues

The registration fee includes breakfast, lunch, and snacks. Do you have any dietary allergies?

- Yes (If yes, please describe.) _____
- No

Reception Attendance

Do you plan to attend the evening reception on Friday, August 11?

Yes No

Select Payment Type

- Pay by check (Make payable to NCS-ACOFP and mail to Nancy Guy, PO Box 662, Lillington NC 27546.)
- Pay by credit card (Register and pay on-line using [this link](#).)

Hotel Information - see NCS-ACOFP website for resort information at www.nc-acofp.org