



NATIONAL ASSOCIATION OF
Community Health Centers®

2024 CHI & EXPO

COMMUNITY HEALTH INSTITUTE

Hyatt Regency, Atlanta, GA
CONFERENCE: August 24-26
Committee Meetings: August 22
Board Meeting: August 23

CONFERENCE REGISTRATION FORM

(Please duplicate for each registrant)

Please type. No telephone reservations will be accepted.

A. ABOUT YOU

Name _____

Name on Badge _____

Title _____

Organization _____

Address _____

City _____ State _____ Zip _____

Email _____

Phone (_____) _____ Fax (_____) _____

Admin Contact _____ Phone (_____) _____

Dietary Needs (ex. Kosher, Vegetarian, Food Allergies, etc.) _____

I am a speaker/moderator/poster presenter Yes No

Speakers/Moderators/Poster Presenters qualify for a \$50 discount on registration fees and must register in order to participate beyond their individual session or poster presentation. Poster presenters are eligible to register for the conference at the NACHC member rate.

No thanks, my session only.

I would like to opt-out of exhibitor mailings for NACHC Conferences.

B. TO REGISTER FOR FULL CONVENTION (All prices for EACH registrant)

	On/Before August 3	After August 3 & On-site
NACHC Member Organizations in Good Standing		
Paid thru March 31, 2024 or later. (Does not apply to Individual Memberships)		
<input type="checkbox"/> First and second registrant from an organization	\$1,415 _____	\$1,565 _____
<input type="checkbox"/> Third or more registrants from same organization	\$1,365 _____	\$1,515 _____
Non-Member Organizations		
<input type="checkbox"/> First and second registrant from an organization	\$2,830 _____	\$3,130 _____
<input type="checkbox"/> Third or more registrants from same organization	\$2,730 _____	\$3,030 _____
Other		
<input type="checkbox"/> Federal Government Officials	\$1,415 _____	\$1,565 _____
<input type="checkbox"/> Full-Time Under-Graduate Students (Photo-copy of I.D. required with this form.)	\$800 _____	\$900 _____

D. TO REGISTER FOR ONLY ONE DAY (If NOT Attending FULL CONVENTION; All prices for EACH registrant. Please check appropriate day, includes full convention activities on a specific day.)

Saturday Sunday Monday (Includes 340B Day participation)

	On/Before August 3	After August 3 & On-site
Saturday Only Member (Access to Exhibit Hall, Saturday General Session, and Saturday Evening Receptions) (per person)		
	\$540 _____	\$690 _____
Saturday Only Non-Member (per person)		
	\$1,080 _____	\$1,230 _____
NACHC Member Organizations (per person, per day)		
	\$1,020 _____	\$1,170 _____
Non-Member (per person, per day)		
	\$2,040 _____	\$2,340 _____

E. 340B DAY

Join NACHC and health center experts as we discuss the most emerging issues in 340B, compliance best practices, and advocacy strategies to protect 340B savings at the federal and state level. 340B Day will provide opportunities to meet with your peers in the health center community through breakout sessions and roundtable discussions.

340B Day will have sessions on Monday, August 26, 2024. Attendance is included in your full or Monday convention registration fee.

Do you plan to participate: Yes No

TOTAL ENCLOSED: \$ _____

G. PAYMENT INFORMATION (Payment **MUST** be received with registration form.)

My check is enclosed and made payable to NACHC.

Please charge my: MasterCard Visa American Express

Card Number _____ Exp. Date _____

Name as it appears on card _____

Cardholder's signature _____

*By registering for this conference, you will be added to the Health Center Advocacy Network and will receive policy and advocacy email communications from NACHC.

2024 ANNUAL CONVENTION AND COMMUNITY HEALTH INSTITUTE

August 24-26, 2024

Hyatt Regency Atlanta
265 Peachtree Street NE,
Atlanta, Georgia, 30303

+1 (404) 577-1234

THREE WAYS TO REGISTER



ELECTRONICALLY

Find this registration form on line at <http://www.nachc.org/conferences/chi/registration/>. You may register automatically with a credit card or you can print the form and mail it with your check.



MAIL/EMAIL

Mail Registration to:
NACHC Meetings/Acct. Dept.
7501 Wisconsin Avenue
Suite 1100W
Bethesda, MD 20814
conferences@nachc.com



FAX

Fax registration form with credit card information to 301-347-0457. **Registration forms will not be processed without payment.**

EARLY-BIRD REGISTRATIONS FEES:

Only apply until Friday, August 2, 2024. See full conference registration section opposite.

NACHC CANCELLATION POLICY:

All Cancellations must be in writing and must be received at NACHC on/before Friday, August 16, 2024.

- Cancellations received on/before Friday, August 16, 2024 will be assessed a \$100 processing fee. (Allow 6-8 weeks following the conclusion of the conference for all refunds.)
- Cancellations received after Friday, August 16, 2024 are not refundable.
- Cancellations after the conclusion of the training are non-refundable.
- Substitutions are encouraged.
- "No Shows" are non-refundable.

DO NOT mail your forms after **Friday, August 9, 2024!** Please bring your registration form and payment (credit card/organizational check) to the "On-Site Registration" counter at NACHC registration.

FOR NACHC USE ONLY:

Pay thru date: _____

Check #: _____

Batch #: _____