

SOTO-USA SEMINAR REGISTRATION FORM

Print this form out, fill it out, scan it and then email it to droblum@aol.com or mail it to:
Dr. Charles Blum, 1752 Ocean Park Boulevard, Santa Monica, CA 90405

Today's Date

Please note that due to the advanced registration discount your registration fee will be non-refundable.

First Name

M.I.

Last Name

Chiropractic Student
 1st/2nd Year Graduate
 DC
 SOTO-USA Member
 r

Street Address

Suite or Apartment No.

City

State/Province

Postal/Zip Code

The above is my:
 Office address
 Home address
 School address

Office Phone

Fax Number

Cell Phone

Home Phone

Email Address

Chiropractic License Number

State

National Provider Number (NPI)

Seminar

SOT Research and Clinical Conference

Dates

October 26-27, 2019

Location

Northern California- San Jose, CA

Fee

See Following

**Before August 1, 2019: MEMBER DOCTOR - \$400, NON-MEMBER DOCTOR \$650 | SOTO-USA Membership: DR \$150, 1st/2nd YEAR DR \$100, Student \$50
MEMBER 1st/2nd YEAR DOCTOR - \$300.00, NON-MEMBER 1st/2nd YEAR DOCTOR \$550 | MEMBER STUDENT - \$300, NON-MEMBER STUDENT \$550**

METHOD OF PAYMENT:
 MasterCard
 Visa
 Check
 Money Order

Credit Card Number

Expiration Date

Name on the Card

3-Digit Security Code on Back

Billing Address for Credit Card:

Street Address

Suite or Apartment No.

City

State/Province

Postal/Zip Code

Notes/Comments This advanced registration discounted fee for the SOT Research and Clinical Conference avails the doctor and student to the discounted a significant discount off of the regular conference price. It assures the doctor or student that they will have a place at the seminar since space is limited and registration will be closed when limits are met. Register now to save and protect your space at the conference.