



VIRTUAL REGISTRATION

2026 Summer Conference
 August 16-21, 2026

(* **Required fields** – NCAPA may document the conference for promotional purposes. Your participation and your guests may be filmed or photographed at this event. Your registration is your consent for use of these images and recordings.

*Name: _____

*Designation (for general tracking purposes): PA NP MD DO OTHER (including PA Students)

Title (if different than designation): _____

*Company: _____

*Address: _____

*City: _____ *State: _____ *Zip: _____

*Email (for PA Student, must end in .edu): _____

*Phone: _____

*Company: _____ *Specialty: _____

ATTENDEE REGISTRATION	<i>EARLY BIRD</i> <small>Must be postmarked by May 31, 2026</small>	<i>REGULAR</i>
NCAPA MEMBER	\$500 <input type="checkbox"/>	\$600 <input type="checkbox"/>
NON-MEMBER	\$675 <input type="checkbox"/>	\$775 <input type="checkbox"/>
<i>STUDENT (Must be a non-practicing provider and attending a PA Program)</i>	\$250 <input type="checkbox"/>	\$250 <input type="checkbox"/>
Add-Ons		SUBTOTAL: \$
1-Year Extended Virtual Access	\$95 + \$7.13 tax = \$102.13	\$
		TOTAL AMT DUE: \$

*Name on Card (please print): _____

*Billing Address: _____

*Credit Card: _____ Visa MC Amex Discover

*Exp. Date: _____ Verification Code (3-digit # on back): _____

*Cardholder Signature: _____

Make checks payable and mail to: NCAPA, 1121 Slater Road, Durham, NC 27703

CANCELLATION AND REFUND POLICY: submit request to conference@ncapa.org

- Requests made by May 31, 2026, will receive a full refund minus a \$25 administrative fee.
- Requests made by June 30, 2026, will receive a full refund minus a \$100 administrative fee.
- Requests made after July 1, 2026, are subject to full forfeiture of funds.
- A \$25 administrative fee will be applied for any changes to a registration that has already been processed.
- A \$25 fee will be charged for all returned checks.
- Membership dues are non-refundable.