

1.

CONTACT INFO

(IF APPLICABLE) UFO ID:		DATE:	
NAME:		PHONE:	
HAVE YOU PREVIOUSLY ATTENDED A NUTRAMETRIX HEALTH PROFESSIONAL COURSE? NO: _____ / YES: _____		WHAT TYPE OF HEALTH PRACTITIONER ARE YOU? _____	
STREET / APT #:			
CITY / STATE:		ZIP:	
EMAIL:			

2.

EVENT INFO

EVENT DATES	LOCATION	REGISTRATION PRICE
OCTOBER 24-25, 2020	BREA, CA EMBASSY SUITES BREA 900 EAST BIRCH ST. BREA, CA 92821, US 714-990-6000 VISIT SHOP LOCAL FOR GREAT ROOM RATES	PRICE PER SEAT: \$195.00 QUANTITY OF SEATS: _____

3.

CREDIT CARD AUTHORIZATION

INCLUDE TOTAL:	\$		
NAME ON CARD:		EXP. DATE:	
CREDIT CARD #:	(LAST FOUR DIGITS ONLY):		
SIGNATURE:			

4.

SUBMIT YOUR REGISTRATION

FAX:	1-336-605-0041 / Attn: nutraMetrix Division
MAIL:	nutraMetrix Division Administrator 1302 Pleasant Ridge Road Greensboro, NC 27409

*ATTENTION: DATES AND LOCATIONS ARE SUBJECT TO CHANGE

POLICIES:

1. Seats are non-refundable and non-transferable to other Event dates except for extreme emergencies and on a case by case basis only.
2. Tickets may be re-sold. However, you have up to 1 week prior to Event to notify the nutraMetrix Division of any change in registration name.
3. Your name badge must be worn at all times to enter in and out of Event room and to enter lunch room - no exceptions. Replacements for lost badges must be purchased at \$250.00 each.
4. Event and Speakers are subject to change.

*We do not recommend finalizing travel/hotel arrangements until your attendance is confirmed by nutraMetrix.
 For questions or concerns, send inquiries to nutraMetrix@nutraMetrix.com.