

## **Registration Instructions**

This Form is intended for those individuals who are affiliated with NACDS Chain Member Companies and/or companies which operate retail stores/pharmacies.

## **Online Registration**

Registration is available online at annual.nacds.org.

## **Fax or Mail**

# Full payment must accompany your registration.

Please make all checks payable to "NACDS." If paying by credit card, complete all credit card information. Invoicing is not available after **January 1, 2024**.

Fax form to: (703) 683-5678

Mail registrations to: NACDS P.O. Box 34814 Alexandria, VA 22334-0814

Electronic Funds should be sent to: Truist Bank ABA# 053101121 Acct# 1000025891523

## **Registration Questions**

If you have any questions, please email annualmtg@nacds.org.

## **Registration Fees**

Chain Member. . . . . . \$3,200 (Domestic/International)

This fee covers all business programs and social activities for one registrant and spouse/companion.

# **Registration Cancellations**

If you cancel by **Friday, March 8, 2024**, NACDS will refund the fee less a 25% administrative fee per registrant. No refunds will be made for cancellations received after **Friday, March 8, 2024**.

# **Registration Policy**

NACDS reserves the right to alter, modify, and/or limit registration to the Annual Meeting based on recommendations made by public health officials and its own judgment concerning health and safety.

Individual Completing Form (Please type or clearly print all information.)				
Name:				
Title:				
Phone:				
Email:				
Registrant Information				
Company Name:				
☐ Dr. ☐ Mr. ☐ Ms. ☐ Mrs. First Time Attending? ☐ Yes ☐ No				
Name:				
Nickname (for Badge):				
Title:				
Phone:				
Mobile Phone:				
Email:				
Address:				
City: State/Province:				
Zip/Mail Code: Country:				
Spouse/Companion Information				
□ Dr. □ Mr. □ Ms. □ Mrs.				
Spouse/Companion Full Name:				
Spouse/Companion Nickname (for Badge):				
Spouse/Companion Email:				
Spouse/Companion Mobile Phone:				
Registration Fees & Payment				
Full payment must accompany your registration.				
Please make all checks payable to "NACDS." If paying by credit card, complete all credit card information.				
Registration Fee: \$				
Payment Method: Check				
Credit Card #:				
Expiration Date:				
Card Identification Number (CVV2) :				
Cardholder's Name:				
Cardholder's Signature:				

NACDS ANNUAL	PALM BEACH, FL	
Name of Registrant:		
Emergency Contact Name:		

Would you like to make a hotel reservation using the NACDS Housing Bureau?

(Please check one) ☐ No ☐ Yes If YES, please continue to read the information below.

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# **Hotel Information**

**Emergency Contact Number:** 

NACDS is the official housing bureau for the NACDS Annual Meeting. Once registered for the meeting, you will receive an Event Registration Confirmation email from registration@nacds.org. This email will contain a custom link to the NACDS Housing Bureau enabling you to make a reservation at one of the official NACDS Annual Meeting hotels listed below. **Note: This custom link will secure housing for the registered attendee only and cannot be used to secure reservations for others.** 

Hotel reservation confirmations will be sent from the NACDS Housing Bureau upon completion of your booking. Any changes to your hotel reservation must be made by **Friday, March 22, 2024** using the link provided in your "Hotel Reservation Confirmation". After **March 22, 2024**, all changes MUST be made directly with your hotel. **PLEASE REMEMBER IT IS YOUR RESPONSIBILITY TO MAKE ALL CHANGES. NACDS WILL NOT ACCEPT OR BE RESPONSIBLE FOR MAKING ANY CHANGES.** 

Please make your hotel reservation before **Friday**, **March 22**, **2024**. After this date, the quoted hotel room rates and availability cannot be guaranteed.

## **Annual Meeting Official Hotels**

All events will be held at The Breakers. Shuttle service will not be provided; however, NACDS will provide complimentary valet parking at The Breakers.

#### The Ben, Autograph Collection

251 North Narcissus Avenue West Palm Beach, Florida 33401 Room Rate: \$389 Single/Double

## The Breakers Palm Beach

1 South County Road Palm Beach, Florida 33480 Room Rate: \$595-\$930 Single/Double

## Canopy by Hilton West Palm Beach Downtown

380 Trinity Place

West Palm Beach, Florida 33401 Room Rate: \$305 Single/Double

## Hilton West Palm Beach

600 Okeechobee Boulevard West Palm Beach, Florida 33401 Room Rate: \$355 Single/Double

# Please note:

- Attendees staying at other hotels will have access to amenities at The Breakers, including use of pool area, golf, tennis, and spa facilities.
- Members who wish to open a master account with their hotel should contact the hotel directly.

## **Hotel Cancellation Policy**

All NACDS Annual Meeting hotels require a room deposit equaling the entire length of your stay, which may be charged to the credit card provided as early as Friday, March 22, 2024. No refunds will be available for changes or cancellations made after this date.

# **Suite Accommodations**

A limited number of suites are available at the official NACDS Annual Meeting Hotels. Companies utilizing suites may not schedule activities that conflict with any official NACDS functions.

## **Housing Questions**

Please contact Stacy Jack at the NACDS Housing Bureau at (703) 837-4301 or email housing@nacds.org.

## **Website Information**

Selected areas of the website are password protected and will be accessible to conference registrants only. This includes a list of participating companies and current registration list. Your log-in information will be activated shortly after your registration has been processed. Your username and password are the same as your online membership account. If you do not know your password, or have not set up a password, you can use the "Forgot Password" function to reset it. If you have questions, please call the NACDS Registration Department at (703) 837-4302 or email registration@nacds.org.

Access to the "Participants" page will be limited to registered members in good standing as of **December 31, 2023**.