

Chairmen: Jennifer Rodriguez, MD | Craig M. Walker, MD

Registration Form

Accreditation pending for approximately 6.00 hours for Physicians, Nurses and Cath Lab Technologists.

All fields required for registration. Please print clearly.

Name (as it should appear on your badge)	Credential (MD, RN, etc.)	Position	
Specialty	Affiliation/Institution		
Street Address	City	State	Zip Code
E-Mail (only one email per person)	Phone (include extension)	Dietary Restrictions	

Payment Information

☐ Payment by Check (Payable to: NCVH Foundation, a 501(c)(3) nonprofit organization. Tax ID# 46-3186713)

☐ Payment by Credit Card: ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover

Credit Card Number: _____ Exp. Date: _____ Security Code: _____

Cardholder Name: _____ Signature: _____

Registration Rates

\$35 Advance ends 10/9

\$50 Registration in-person, on-site 10/14 7AM - 1PM

Phone 337.993.7920

Mail NCVH Foundation
105 Bolton Street
Lafayette, LA 70508

Online ncvh.org/meridian

Fax 337.993.7922

Email registration@ncvh.org

Cash, checks, and all major credit cards accepted.



Meeting Location
MSU Riley Center
2200 5th Street
Meridian, MS 39301

Accommodations:
The Threefoot Hotel
601 22nd Avenue
Meridian, MS 39301

Parking Area:
Arts District Parking Deck – Free Parking
712 24th Ave, Meridian, MS 39301

Area Airport:
Meridian Regional Airport