

NASN'S Virtual Conference



OCTOBER 14-16, 2026

LEARNING WITHOUT LIMITS



NASN's Virtual Conference: October 14 - 16, 2026

<https://www.nasn.org/nasnvirtual>

REGISTRATION RATE CUTOFF DATES: Early: Prior to September 28th | Regular: After September 28th

CANCELLATION DEADLINE: September 28th (Review the Terms and Conditions of Attendance and Participation for the Cancellation Policy)

Full Name: _____

Mailing Address: _____

City, State (Province), Zip: _____

Daytime Telephone: _____

Preferred Email: _____ NASN ID: _____

Reasonable Accommodations: Requests for accessibility accommodations should be emailed to the conference team at conference@nasn.org.

NASN strives to make reasonable accommodations for all attendees submitting a request.

Watch Together Sessions: October 14 - 16, 2026

1:00 PM - 2:00 PM: [Session 1 \(1.0 ANCC NCPD Contact Hours\)](#)

2:00 PM - 2:30 PM: Break

2:30 PM - 3:30 PM: [Session 2 \(1.0 ANCC NCPD Contact Hours\)](#)

3:30 PM - 4:00 PM: Break

4:00 PM - 5:00 PM: [Session 3 \(1.0 ANCC NCPD Contact Hours\)](#)

There are 9 *Watch Together Sessions* that will premiere at a scheduled time, giving attendees the opportunity to experience the content together. Attendees can connect and share thoughts with one another through the session chat and submit questions to the presenter using the Q&A feature.

Watch Anytime Sessions: On Your Own Time through December 12th

There are 9 *Watch Anytime Sessions (1.0 ANCC NCPD Contact Hours each)* that offer the flexibility to learn on your own schedule. These can be accessed at any time during the conference access period, allowing attendees to choose when and where they engage with the content.

Accreditation Statement

The National Association of School Nurses is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation.

National Association of School Nurses is approved by the California Board of Registered Nursing: Provider No. CEP 12292.

VIRTUAL REGISTRATION: Up to 18.0 ANCC NCPD Contact Hours

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Early / Regular

\$335 / \$400 \$ _____

\$285 / \$350 \$ _____

\$460 / \$525 \$ _____

TOTAL AMOUNT TO PAY HERE \$ _____

If the total calculated on the registration form is incorrect, NASN is authorized to charge the correct amount.

REGISTRATION QUESTIONS - Responses to the Following Questions are Required

- Select one indicating your nursing license. APRN RN LPN/LVN Other
- Terms and Conditions of Attendance and Participation: Please acknowledge that you have read and agreed to these terms before you continue: <https://www.nasn.org/nasnvirtual-terms> _____ (Place your initials here)
- Can NASN share your name and primary contact information with conference sponsors? Yes No

PAYMENT - Prepayment in U.S. Funds is Required

PAY BY CHECK

Make checks payable to NASNVirtual and mail directly to:

NASNVirtual
1100 Wayne Avenue Suite 925
Silver Spring, MD 20910

PAY BY CREDIT CARD

Payment by credit card is acceptable but should be made in our secure online form. You may also mail or email your form to conference@nasn.org and NASN will work with you to make payment.

PAY BY PURCHASE ORDER

If paying with a Purchase Order, include this form and your purchase order. Mail or email to conference@nasn.org

Have a group of 10 or more? A 10% discount may apply.