

DIFFERENTIATE YOUR
CHIROPRACTIC CARE AS
A SPORTS SPECIALIST
AND JOIN THE TOP TIER OF
YOUR PROFESSION

DID YOU KNOW?

RESEARCH SUGGESTS DCS
WITH SPORTS CERTIFICATIONS
TYPICALLY EARN MORE
MONEY ANNUALLY THAN
NON-CERTIFIED DOCTORS.

REGISTER TODAY FOR THE NEW SPORTS DIPLOMATE PROGRAM

The Diplomate American Chiropractic Board of Sports Physicians (DACBSP®) is the highest level of achievement in Sports Chiropractic! CCSP® or DACBSP® certifications are the only Sports Medicine Chiropractic certifications in the United States that are recognized by the American Chiropractic Association.

Join us this fall as we start our new hybrid DACBSP® program with 180 hours online and 20 hours of in-person learning!

The online coursework will consist of reading material, narrated PowerPoint presentations, AND recorded lectures. Save travel expenses and study from home.

Earning the DACBSP® certification requires successful completion of 200 coursework hours, a written exam, a practical exam, and 250 hours of practical experience in the field. The CCSP® is a prerequisite for the DACBSP®.

Coordinator: Dr. William Moreau, DC, DACBSP®, FACSM, Distinguished Clinical Professor at University of Western States, Former Vice President at the United States Olympic Committee

SCHEDULE

The mandatory in-person hours will occur over one weekend in Vancouver, Washington (15 minutes from PDX airport):

Dates listed are for 2026. Exact location details will be provided to program registrants.

CEUs will be available (for select states) for the in-person hours.



GET STARTED

Online access will begin October 30, 2025! Registration is open NOW through December 31, 2025.

Fee: \$3,950

5 or 10 month interest-free payment plans are available. First payments are processed when the program kicks-off.

Easy Registration:

Register by calling 712.260.2507 or by completing the attached registration form.

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REGISTRATION FORM

Please fill out the information below and Fax this form to 719.494.8012, Email to dconline@dconline.org, or Mail to DConline, 1499 SE Tech Center Place, Suite 350 Vancouver, WA 98683				
Please Print neatly so we can effectively help you.				
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		1		
EMAIL:				
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PROGRAM or COURSE TITLE:				
PAYMENT PLAN: (if applicable)				
Credit Card Information* (Master Card, American Express, or VISA) Name on Card:				
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Expiration Date:				
Print Credit Card billing address below ONLY if different than above address.				

*DConline® will NOT retain credit card information. This form is shredded after posting tuition charge.

Thank you for using DConline/SCUHS for your educational requirements.

We appreciate you and your business!