

ARKANSAS CHIROPRACTIC SOCIETY PRESENTS:



- Date: July 19 -20, 2025
- Module: Begins Promptly At 8AM
- Approval: ASBCE Applied
- Location: Aloft, 716 Rahling Road, Little Rock, AR 72223. Contact (501)791-9999.
- Fees: \$250 for 24 Hours (both speakers). Free to newly licensed doctors. Complimentary lunch provided on Saturday. To register, contact ACS at acsexecsec@cox.net or (479)806-1138.

About The Instructors & Courses:

THIS COURSE: Timeless Health Aging Theories Nobel Impacts, Dr. Murphy will educate on the breakdown of the eight essential factors/habits that improve health and reduce the risk of health problems. We will analyze the entire body for systemic wellness; including but limited to ATP, mitochondria, laser therapy, brain function, low back pain, blood flow and state-of-the art technologies that are tailor-made for expert chiropractic care.

INSTRUCTOR: Dr. Dan Murphy has taught more than 1,250 post-graduate continuing education seminars in the United States and around the world. He graduated magna cum laude from Western States Chiropractic College. He has written over 68 quarterly columns in the American Journal of Clinical Chiropractic and is a contributing author in several books on motor vehicle collision injuries and pediatric chiropractic.

THIS COURSE: Get Back in the Game! This seminar will not only teach the doctors the incredible volume of research behind their lasers that supports many uses in practice that will set them apart from their competition.

INSTRUCTOR: Dr Kirk Gair has been in private practice since 1999 and began using Erchonia cold lasers in 2004. During that time, he has worked with athletes of all levels, including Super Bowl Champions, MLB champions, High School wrestling National and State champions, college and high school football, baseball, and track champions and record holders, and with the Dodgers/Angles Fantasy Camp.

SEMINAR TOPICS

**TIMELESS HEALTH AGING
GET BACK IN THE GAME**

Our Speakers :



Dan Murphy, DC



Kirk Gair, DC

ACS SEMINAR REGISTRATION FORM

Name: _____

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- **Make checks payable to: ACS & mail to P.O. Box 10213, Fort Smith, AR, 72917**

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