Registration Form — *One registration form per person (Please print)*

Name _____

Address _____

City/State/Zip _____

Phone/Fax _____

E-mail _____

Additional Registration Information

Americans with Disabilities Act

❏ Audio   ❏ Visual

I require a special meal: ❏ Vegetarian   ❏ Kosher   ❏ Gluten Free   ❏ Other _____

Fall 2019 CE Courses

Oral Clinical Examination Review—Aug. 22

	By July 22	After July 22	Subtotal
AAPD Member	$ 320	$ 420	$_____
AAPD Student Member	$ 320	$ 420	$_____

Comprehensive Review of Pediatric Dentistry—Aug. 23-25

	By July 23	After July 23	Subtotal
AAPD Member	$ 990	$ 1,090	$_____
AAPD Student Member	$ 495	$ 595	$_____
Non-Member Dentist	$ 1,190	$ 1,290	$_____

Dental Assistant Sedation Course—Oct. 11-12

	By Sept. 11	After Sept. 11	Subtotal
Dental Assistant/ Office Staff	$ 440	$ 540	$_____

Sedation for the Pediatric Dental Patient—Oct. 11-13

	By Sept. 11	After Sept. 11	Subtotal
AAPD Member	$ 990	$ 1,090	$_____
AAPD Student Member	$ 495	$ 595	$_____
Non-Member Dentist	$ 1,190	$ 1,290	$_____

Safety Symposium—Nov. 8-9

	By Oct. 8	After Oct. 8	Subtotal
AAPD Member	$ 765	$ 865	$_____
AAPD Student Member	$ 395	$ 495	$_____
Non-Member Dentist	$ 965	$ 1,065	$_____
Dental Assistant/ Office Staff	$ 395	$ 495	$_____

Total Amount Enclosed $_____

Payment

❏ American Express   ❏ Discover

❏ MasterCard   ❏ Visa

❏ Check made payable to AAPD is enclosed

Card number _____

Expiration Date _____

Cardholder Name _____

Signature _____

Online   *http://www.aapd.org/events*

Fax to   Meetings Department at:
(312) 337-6329

Mail to   Delaware Place Bank
AAPD Lockbox
190 E. Delaware Place
Chicago, IL 60611

If paying by check, please make payable to the American Academy of Pediatric Dentistry.

Cancellation

Notice of cancellation must be made in writing and sent to: AAPD Meetings Department, 211 E. Chicago Avenue, Ste. 1600, Chicago, IL 60611-2637, or faxed to (312) 337-6329 or e-mailed to Meeting Services Co-ordinator Caroline (Price) Oliva at *coliva@aapd.org*.

AAPD is not responsible for travel expenses or penalties under any circumstances.

how to register