

REGISTRATION FORM

Cost: **\$285** for Dentists / **\$185** for RDHs and Aux. / U.S. Funds **\$145** for Staff attending w/ Dr. *(see yellow starburst above for details)*

Late Fee: Add \$10/registrant if after **Friday, January 25, 2019.**

Please *clearly* enter your name as it appears with the State Board of Dental Examiners for your CE credit.

Refunds / Cancellation Dates:
Please see policy on reverse side. By registering, you agree to the Terms of Policy.

I / WE WILL BE ATTENDING:

2/2/19 • Hershey, PA

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