

Registration Form

Registration and Name Badge Required for Entrance to Exhibit Hall and All Events

Name _____
 Address _____
 City _____ State _____ Zip _____

Preferred Name For Badge _____
 AGD Member? Yes/No AGD Number _____

*If you do not provide an AGD number, you will be responsible for recording your own AGD credits.

First Time Attendee? Yes/No (please circle one)

Office # () _____ Fax # () _____

Other # () _____

E-Mail _____

Please include E-Mail address for your confirmation of registration and payment.

Staff Members Attending _____

Children Attending _____ Age _____

_____ Age _____

Please include additional staff/children on a separate sheet of paper.

Please reserve the following sessions: Number Attending

Tuesday 9/2 8:00 AM - 5:00 PM	Lorraine Guth Communication and Case Presentation	
Tuesday 9/2 8:00 AM - 5:00 PM	Mike Pruett First 100 Things to Know for GP Surg. Implant.	
Tuesday 9/2 1:00 PM - 5:00 PM	Scott Herndon Free CPR Course **First 35 Registrations Only	
Wednesday 9/3 8:00 AM - 5:00 PM	Andrew Kelly Soft Tissue, Hard Tissue Grafting	
Wednesday 9/3 8:00 AM - 5:00 PM	Joe Camp Core Concepts of Rotary Endodontics	
Wednesday 9/3 8:00AM - 5:00 PM	Dale Miles Cone Beam CT, Softward Interpretation, Treatment	
Wednesday 9/3 1:00 PM - 4:00 PM	Jackie Dorst Sterile Design	
Wednesday 9/3 8:00 AM - 12:00 PM	Scott Herndon CPR Course \$35.00	
Thursday 9/4 8:00 AM - 5:00 PM	Charles Braga Periolase LANAP	
Thursday 9/4 8:00 AM - 5:00 PM	P.D. Miller Cutting Edge Soft Tissue Plastic Surg/Perio Techn.	
Thursday 9/4 8:00 AM - 12:00 PM	Joe Camp *Participation Course Fee \$35.00 Advancing Your Endodontic Skills	
Thursday 9/4 9:00 AM - 12:00 PM	Jackie Dorst OSHA	
Thursday 9/4 1:00 PM - 3:00 PM	Jackie Dorst The Sterile Challenge	
Thursday 9/4 8:00 AM - 5:00 PM	Howard Gamble Technology in the Dental Office	
Thursday 9/4 8:00 AM - 12:00 PM	Scott Herndon CPR Course \$35.00	
Friday 9/5 8:00 AM - 12:00 PM	Chris Rothman/John Roberson Emergency Protocol	
Friday 9/5 1:00 PM - 5:00 PM	Robert Stutman Not My Kids! Not My Company!	
Friday 9/5 8:00 AM - 12:00 PM	Patricia DeVilliers/Mike Edwards Hard Tissue Pathology	
Friday 9/5 1:00 PM - 5:00 PM	Patricia DeVilliers/Mike Edwards Soft Tissue Pathology and Biopsy Technique	
Friday 9/5 8:00 AM - 5:00 PM	Frank Higginbottom Prosthetic Planning Associated with Implants	

FEES	Fees Postmarked by May 29th	Fees Postmarked by August 12th	Fees Postmarked after August 12th
AGD Member	\$380.00	\$455.00	\$525.00
Non-Member	\$460.00	\$555.00	\$625.00
Retired Dentist	\$85.00	\$85.00	\$85.00
Dental Student	\$30.00	\$30.00	\$30.00
1st Year Practice	\$30.00	\$30.00	\$30.00
Staff	\$95.00	\$95.00	\$95.00
Spouse	\$25.00	\$25.00	\$25.00

New Member Application Fee \$2.00 \$ _____

Staff Registration Number of Staff _____ x \$95.00 \$ _____

1st Staff Member must register at Doctor's rate if Doctor is not attending

Spouse Registration _____ x \$25.00 = \$ _____

Spouse Name For Badge _____

Must Pay Registration Fee for Spouse to Receive Name Badge.

*PARTICIPATION FEE REGISTRATION

Labor Day Seafood Luau

Age 7 - Adult _____ x \$20 \$ _____

Under 7 Free _____ x \$0

CPR Registration Tuesday _____ x \$0

CPR Registration Wednesday/Thursday _____ x \$35 \$ _____

CPR Participants (circle one) _____

Face Time With Exhibitors (Drs. Only) _____ x \$0

Thursday/Friday /both days(Circle One)

Dr. Joe Camp Participation Course _____ x \$35 \$ _____

Charter Boat Fishing _____ x \$115 \$ _____

(Snacks Included)

Spouse Brunch _____ x 30 \$ _____

Total Enclosed \$ _____

We are now accepting Visa/Mastercard payments:

Card Number _____

Expiration Date _____ Security Code on Back _____

Name on Card _____

Signature _____

Refund Policy: A full refund will be given if the cancellation is received by August 5, 2008. An administrative charge of \$50.00 will be withheld if the refund is postmarked after August 5, 2008. No refund will be given on or after August 31, 2007.

Join the AGD for \$2.00! Non-members may join the AGD for \$2.00 plus the Non-Member Registration Fee. To take advantage of this offer, check the New Member Application box and add \$2.00 to the appropriate Non-Member Fee. A complete application must be returned by the last day of the meeting (September 5, 2008)

The covered period will be from July 1 - December 31, 2008. Dues for 2008 will be payable on January 1, 2009.

Please complete entire registration form.

Make checks payable and mail to:

Alabama Academy of General Dentistry

2723 Elberta Street

Northport, AL 35475

For additional information:

Phone: 205.333.0460

E-mail: angie4alagd@bellsouth.net

Fax: 205.333.0466

www.alagd.org