2010 ADT Registration Form

❑ Full Membership 2010:

❑ **$625.00** + GST = $656.25 (previous members) or
❑ **$725.00** + GST = $761.25 (new members)

❑ Transferrable Membership:

❑ **$650.00** + GST = $682.50 (previous members) or
❑ **$750.00** + GST = $787.50 (new members)

*Allows you to share your membership with other members of your lab. Only 1 person on this membership is able to attend each seminar. Must provide all names of those eligible to attend seminars on this form.

❑ Condensed Membership:

❑ **$400.00** + GST (maximum 6 seminars only)

❑ Group Rates:

❑ 2 – 5 RDTs/Technicians.....10% Discount per person
❑ 6 – 10 RDTs/Technicians.....15% Discount per person
❑ 11+ RDTs/Technicians.....20% Discount per person

*Must be from the same Laboratory to qualify for group discount rate

Registration Information:

(Select type of membership for each name)

❑ Full ❑ Condensed ❑ Transferrable
Mr. Ms. _____ RDT? ❑ Yes ❑ No
(circle one) First Name Last Name *(check one)*

❑ Full ❑ Condensed ❑ Transferrable
Mr. Ms. _____ RDT? ❑ Yes ❑ No
(circle one) First Name Last Name *(check one)*

❑ Full ❑ Condensed ❑ Transferrable
Mr. Ms. _____ RDT? ❑ Yes ❑ No
(circle one) First Name Last Name *(check one)*

❑ Full ❑ Condensed ❑ Transferrable
Mr. Ms. _____ RDT? ❑ Yes ❑ No
(circle one) First Name Last Name *(check one)*

Laboratory Name: _____

Address: _____

City: _____ Prov.: _____ Postal Code: _____

Phone: _____ Email (mandatory): _____

Payment Information:

❑ Cheque (Payable to the Academy of Dental Technology) ❑ VISA ❑ MasterCard

Amount Authorized: _____

Card Number: _____ Exp. Date: _____

Card Holder Name: _____ Signature: _____

Mail Registration to: Academy of Dental Technology – 35–145 Royal Crest Court, Markham, ON L3R 9Z4

Fax Registration to: (905) 489–1971 • **Email Registration to:** dentalevents@rogers.com

Questions? Call: (905) 258–0363 • **Email:** dentalevents@rogers.com • **Website:** www.academydentaltechnology.com