

★ REGISTRATION

The TEXAS Meeting ~ Texas Dental Association 142nd Annual Meeting

Registration form for all registrants – Please type or print and photocopy as needed.

Registration form also available on the TEXAS Meeting website: www.texasmeeting.com

There will be a charge of \$30 per person for on-site registration.

Your 2012 TDA dues must be paid before you (or your staff) can register at the member rate.

- | | | | |
|---|-------|---|------|
| A. TDA Member | \$0 | I. Dental Student Non-member ASDA | \$25 |
| B. Retired Dentist (ADA/TDA) | \$0 | J. Hygienist (of member dentist) | \$0 |
| C. ADA Member Resident Outside TX/
International Dentist Assn. Member | \$100 | K. Dental Assistant (of member dentist) | \$0 |
| D. Non-member Dentist in Texas (one time only) | \$75* | L. Lab Tech (of member dentist). | \$0 |
| E. Post Graduate Student | \$25 | M. Business Assistant (of member dentist) | \$0 |
| F. Family Member (of member dentist) | \$0 | O. Pre-Dental Student. | \$0 |
| G. Active Duty Military/ADA Member. | \$50 | 1. Hygienist (not employed by TDA member) | \$50 |
| Q. Non-member Dentist. | \$995 | 2. Dental Assistant (not employed by TDA member) | \$50 |
| H. Dental Student/ASDA Member | \$0 | 3. Lab Tech (not employed by TDA member). | \$50 |
| | | 4. Business Assistant (not employed by TDA member) | \$50 |

* Not applicable if registered in category "D" in 2008, 2009, 2010 & 2011. If you were a member in good standing for the 2011 year you are not eligible for category D in 2012.

3. NAME for Badge	4. Registration INFORMATION	5. Register for COURSES - include A.M. and P.M. course #s, events, and fees			6. TOTAL \$ registration & course fees
		THURSDAY	FRIDAY	SATURDAY	
Attendee 1 (list dentist here if attending) FIRST <u>John</u> LAST <u>Doe</u>	REG. CATEGORY # <u>A</u> REG. FEE \$ <u>\$0</u>	COURSES/FEES <u>146 \$75</u> A.M. # FEE \$ <u>176 \$75</u> P.M. # FEE \$ SPECIAL EVENTS/FEES	COURSES/FEES <u>F07 \$65</u> A.M. # FEE \$ P.M. # FEE \$ SPECIAL EVENTS/FEES <u>F98 \$60</u> <u>F100 \$50</u>	COURSES/FEES A.M. # FEE \$ <u>532 \$45</u> P.M. # FEE \$ SPECIAL EVENTS/FEES <u>844 \$60</u>	\$140 A.M. FEES \$ \$120 P.M. FEES \$ EVENT FEES \$ \$130 EVENT FEES \$

Receipt of Registration Badges: Those persons submitting forms postmarked by **APRIL 5** will receive badges by mail.

Those persons submitting forms postmarked after **APRIL 5**, but before **APRIL 13**, may pick up badges on-site.

Please do not mail forms after April 13. Any registration forms not mailed prior to April 13 must be brought directly to on-site registration.

NO REFUNDS WILL BE GIVEN FOR CANCELLATIONS POSTMARKED AFTER APRIL 5.

Questions? Call QMS (678) 341-3039. Email: tda@qmsreg.com

If registration form is processed electronically, DO NOT MAIL – May result in duplicate registration

Return to: TDA Registration, C/O QMS Services, Inc., 6840 Meadowridge Court, Alpharetta, GA 30005

REGISTRATION FORM

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REGISTRATION FORM FOR ALL REGISTRANTS

Only one form is necessary for each office and it can be photocopied to accommodate additional registrants in your office. Be sure to fill out both pages of this form. Use a ballpoint pen.

1. Dentist/Attendee Name _____ ADA Member Number _____
 Business Address _____
 City _____ State _____ Zip _____
 Business Phone () _____ Fax () _____ Email _____
important: to receive prompt confirmation

2. Year of Graduation (Dentist) _____ Emergency Contact Name _____
 Emergency Contact Phone () _____

Registration Categories & Fees

Please make certain to complete all sections of form.

See reverse to register additional attendees, total all fees, and complete payment information section.

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		THURSDAY	FRIDAY	SATURDAY	
Attendee 1 (list dentist here if attending) _____ FIRST _____ LAST	REG. CATEGORY # _____	COURSES/FEES	COURSES/FEES	COURSES/FEES	
	REG. FEE \$ _____	A.M. # FEE \$ _____	A.M. # FEE \$ _____	A.M. # FEE \$ _____	A.M. FEES \$ _____
		P.M. # FEE \$ _____	P.M. # FEE \$ _____	P.M. # FEE \$ _____	P.M. FEES \$ _____
		SPECIAL EVENTS/FEES	SPECIAL EVENTS/FEES	SPECIAL EVENTS/FEES	
		EVENT# FEE \$ _____	EVENT# FEE \$ _____	EVENT# FEE \$ _____	EVENT FEES \$ _____
		EVENT# FEE \$ _____	EVENT# FEE \$ _____	EVENT# FEE \$ _____	EVENT FEES \$ _____
Attendee 2 _____ FIRST _____ LAST	REG. CATEGORY # _____	COURSES/FEES	COURSES/FEES	COURSES/FEES	
	REG. FEE \$ _____	A.M. # FEE \$ _____	A.M. # FEE \$ _____	A.M. # FEE \$ _____	A.M. FEES \$ _____
		P.M. # FEE \$ _____	P.M. # FEE \$ _____	P.M. # FEE \$ _____	P.M. FEES \$ _____
		SPECIAL EVENTS/FEES	SPECIAL EVENTS/FEES	SPECIAL EVENTS/FEES	
		EVENT# FEE \$ _____	EVENT# FEE \$ _____	EVENT# FEE \$ _____	EVENT FEES \$ _____
		EVENT# FEE \$ _____	EVENT# FEE \$ _____	EVENT# FEE \$ _____	EVENT FEES \$ _____

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		THURSDAY	FRIDAY	SATURDAY				
Attendee 3 FIRST _____ LAST _____	REG. CATEGORY # _____	COURSES/FEES		COURSES/FEES		COURSES/FEES		
	REG. FEE \$ _____	A.M. # _____ FEE \$ _____	A.M. # _____ FEE \$ _____	A.M. # _____ FEE \$ _____	A.M. FEES \$ _____			
		P.M. # _____ FEE \$ _____	P.M. # _____ FEE \$ _____	P.M. # _____ FEE \$ _____	P.M. FEES \$ _____			
		SPECIAL EVENTS/FEES		SPECIAL EVENTS/FEES		SPECIAL EVENTS/FEES		
		EVENT# _____ FEE \$ _____	EVENT# _____ FEE \$ _____	EVENT# _____ FEE \$ _____	EVENT FEES \$ _____			
		EVENT# _____ FEE \$ _____	EVENT# _____ FEE \$ _____	EVENT# _____ FEE \$ _____	EVENT FEES \$ _____			
Attendee 4 FIRST _____ LAST _____	REG. CATEGORY # _____	COURSES/FEES		COURSES/FEES		COURSES/FEES		
	REG. FEE \$ _____	A.M. # _____ FEE \$ _____	A.M. # _____ FEE \$ _____	A.M. # _____ FEE \$ _____	A.M. FEES \$ _____			
		P.M. # _____ FEE \$ _____	P.M. # _____ FEE \$ _____	P.M. # _____ FEE \$ _____	P.M. FEES \$ _____			
		SPECIAL EVENTS/FEES		SPECIAL EVENTS/FEES		SPECIAL EVENTS/FEES		
		EVENT# _____ FEE \$ _____	EVENT# _____ FEE \$ _____	EVENT# _____ FEE \$ _____	EVENT FEES \$ _____			
		EVENT# _____ FEE \$ _____	EVENT# _____ FEE \$ _____	EVENT# _____ FEE \$ _____	EVENT FEES \$ _____			
Attendee 5 FIRST _____ LAST _____	REG. CATEGORY # _____	COURSES/FEES		COURSES/FEES		COURSES/FEES		
	REG. FEE \$ _____	A.M. # _____ FEE \$ _____	A.M. # _____ FEE \$ _____	A.M. # _____ FEE \$ _____	A.M. FEES \$ _____			
		P.M. # _____ FEE \$ _____	P.M. # _____ FEE \$ _____	P.M. # _____ FEE \$ _____	P.M. FEES \$ _____			
		SPECIAL EVENTS/FEES		SPECIAL EVENTS/FEES		SPECIAL EVENTS/FEES		
		EVENT# _____ FEE \$ _____	EVENT# _____ FEE \$ _____	EVENT# _____ FEE \$ _____	EVENT FEES \$ _____			
		EVENT# _____ FEE \$ _____	EVENT# _____ FEE \$ _____	EVENT# _____ FEE \$ _____	EVENT FEES \$ _____			

REGISTRATION FEE TOTAL	\$	+	COURSES & EVENTS FEE TOTAL	\$	+	HANDLING	\$5	=	GRAND TOTAL	\$
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Include all registration and course fees

METHOD OF PAYMENT (ALL PAYMENTS IN U.S. FUNDS)

- CHECK: All checks should be made payable to the Texas Dental Association. Please check calculations for correct total.
- CREDIT CARD: _____ VISA _____ Mastercard _____ AMEX _____ Discover
- Credit card number _____ Exp. _____ Billing ZIP code _____
- Name as it appears on card _____ Signature _____

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