

**Section 1 – Registration Information** (Please print clearly)

Name: *(This will appear on the badge)* Degree(s):

Company:

Address:

City: State: Zip Code: Country:

Telephone: Fax: Email: *(Required to receive confirmation)*

On-Site Mobile Number *(Emergency Only)*:

Have you ever attended the AADSM Annual Meeting:  Yes  No

Section 2 – Registration Types*	On or before 4/20	4/21 - 5/19
<input type="checkbox"/> AADSM Member	\$495	\$550
<input type="checkbox"/> AADSM Member - Active Duty Military	\$125	\$140
<input type="checkbox"/> AADSM Student Member	\$50	\$50
<input type="checkbox"/> Dental Staff of AADSM Member – Employer’s Name: Employer’s Email:	\$250	\$295
<input type="checkbox"/> Nonmember	\$650	\$695
<input type="checkbox"/> Dental Staff of Nonmember – Employer’s Email:	\$325	\$370
<input type="checkbox"/> Guest – Guest Name: <i>(Family members only, guests must be 16 years of age)</i>	\$50	\$50

\* Includes admittance to general sessions, President’s Reception and the exhibit hall. General registration **does not** include Educational Courses, Meet the Professor sessions, or Bite-sized Learning Lunch sessions.

**Section 2 Total:** \$

**Section 3 – Membership Dues:**  
Not a member? Save money and register at the membership rate listed below.

Please **choose one** of the options below.

**Regular Membership:** \$345\*\*

**Student Membership:** Free  
*(With completion of Student Membership Application)*

**Section 3 Total:** \$

\*\* A copy of a valid dental/medical license must be submitted. Membership will be valid through December 31, 2018.

**Educational Courses, Meet the Professor sessions, and Bite-sized Learning Lunch sessions are an additional fee.**  
You must be registered for the general session of the meeting to attend any of these sessions. Advanced registration is strongly encouraged; space is limited and sold on a first-come, first-served basis.

**Section 4 – Educational Courses:** Friday, June 1

Please <b>choose one</b> of the courses below, if desired.	Member	Nonmember
<input type="checkbox"/> <b>C01:</b> Laying the Groundwork <i>(Introductory Course)</i>	\$85	\$125
<input type="checkbox"/> <b>C02:</b> The Kitchen Sink Approach <i>(Advanced Course)</i>	\$85	\$125

**Section 4 Total:** \$

**Section 5 – Lunch Sessions:** Friday, June 1 – Saturday, June 2

Please **choose which session** you would like to attend. You can only attend one session per day. **Purchase both Bite-sized Learning Lunch sessions and save! If purchasing both sessions, your total is only \$80!**

	Member	Nonmember
<b>Friday, June 1</b>		
<input type="checkbox"/> Meet the Professor: _____ <i>(Please write in choice of M01-M03 above)</i>	\$85	\$95
<input type="checkbox"/> Bite-sized Learning: B01	\$45	\$45
<b>Saturday, June 2</b>		
<input type="checkbox"/> Meet the Professor: _____ <i>(Please write in choice of M04-M06 above)</i>	\$85	\$95
<input type="checkbox"/> Bite-sized Learning: B02	\$45	\$45

**Section 5 Total:** \$

**Grand Total** (Please total all the sections on this form) \$

**Section 6 – Payment Method**

**Check:** Make payable to the AADSM  
*(U.S. funds drawn on a U.S. bank)*

**Credit Card:** (check one)  
 MasterCard  Visa  American Express  Discover

Cardholder Name:

Card Number: Exp. Date: Validation Code:

Billing Address Zip Code:

Signature: Date: