

# Academy for Sports Dentistry 36th Annual Symposium

JUNE 28-30, 2018 • NEW ORLEANS, LOUISIANA

## REGISTRATION INFORMATION

### MEALS

Continental breakfasts on Friday and Saturday mornings; Recognition Lunch on Friday; and the President's Reception on Friday evening are included in the Symposium registration fee.

Continental breakfast, break and box lunch are included in the Team Dentist course registration fee.

### REFUND POLICY

A full refund, less a \$50.00 administrative fee, will be made up to four weeks prior to the Symposium. No refunds after May 28, 2018.

*Complete this form and mail with your check or go to the website and submit with your credit card payment today! Please type or print.*

Name \_\_\_\_\_ DDS or DMD AGD # \_\_\_\_\_  
Spouse/Partner Name If Attending \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_  
Office Number \_\_\_\_\_ Fax Number \_\_\_\_\_ E-mail \_\_\_\_\_  
Emergency Contact \_\_\_\_\_ Emergency Phone Number \_\_\_\_\_  
League / Team \_\_\_\_\_ League / Team \_\_\_\_\_

### REGISTRATION AND PAYMENT

Mail your registration form and check to the address below or register on line with your credit card payment:

Academy for Sports Dentistry  
3085 Stevenson Drive, Suite 200  
Springfield, IL 62703, USA  
www.academyforsportsdentistry.org  
Email: meeting@academyforsportsdentistry.org

Checks must be in U.S. funds. Credit card payments with Visa or Mastercard are accepted. Make checks payable to: Academy for Sports Dentistry. Credit card payments can be submitted at [www.academyforsportsdentistry.org](http://www.academyforsportsdentistry.org).

### 2018 Registration Fees

#### Symposium Only (12.5 CEUs)

- Members \$ 725.00
- Nonmembers \$ 825.00
- Hygienists, Dental Assistants, Lab Technicians, Athletic Trainers, Residents\* \$ 450.00

*(Includes two continental breakfasts, breaks, Recognition Luncheon and President's Reception)*

*\*Students/Residents who do not want CEU credit are complimentary. (Meals are not included, but tickets for above Receptions and Luncheon can be purchased separately.)*

#### Team Dentist Course Only (7 CEUs for lecture 2 CEU's for workshop.)

- Members \$ 625.00
- Nonmembers \$ 725.00
- Hygienists, Dental Assistants, Lab Technicians, Athletic Trainers, Licensed Residents\* \$ 330.00

*(Includes workshop, continental breakfast, breaks, and box lunch.)*

In order to become certified you must complete the lecture portion as well as the workshop. *\*Students/Residents who do not want CEU credit or certification are complimentary. (Meals are not included.)*

#### Symposium and Team Dentist Course Package

(21.5 CEU's for full participation includes workshop)

- Members \$ 1120.00
- Nonmembers \$ 1270.00
- Hygienists, Dental Assistants, Lab Technicians, Athletic Trainers, Licensed Residents\* \$ 620.00

*(Includes workshop, continental breakfast, breaks, Reception Luncheon and President's Reception)*

*\*Students/Residents who do not want CEU credit or certification are complimentary. (Meals are not included, but tickets for Symposium Receptions and Luncheon can be purchased separately.)*

**Optional Events: The following event tickets are included in the full Symposium registration. However, extra tickets can be purchased for students, residents who are not receiving CEU credit or certification, spouse/partner and guests.**

- Recognition Luncheon \$80.00 x \_\_\_\_\_ Tickets = \$ \_\_\_\_\_
- President's Reception \$95.00 x \_\_\_\_\_ Tickets = \$ \_\_\_\_\_

### MEMBER BRING A COLLEAGUE

Any current ASD members who bring a nonmember registrant to the 2018 Symposium will receive **10% off** of their registration fee for **each** nonmember registrant they bring. In addition, each nonmember registrant sponsored by an ASD member will also receive the 10% discount.

Referred by \_\_\_\_\_ ASD Member  
# \_\_\_\_\_ of nonmembers referred (see attached forms)  
\_\_\_\_\_ % off of registration fee for nonmember referrals

**10%** discount for nonmembers who are attending with an ASD member.

In the event of a cancellation of a colleague, you will be responsible for the 10% balance due on your registration fee.

Make checks payable to: Academy for Sports Dentistry  
Credit card payments can be submitted at [www.academyforsportsdentistry.org](http://www.academyforsportsdentistry.org)

### HOTEL RESERVATIONS

The Academy for Sports Dentistry has contracted hotel rooms with the Windsor Court Hotel at discounted rates on your behalf. If our contracted housing obligations are not met, we pay substantial penalty fees to the hotel. When we are able to monitor attendance through our group room block, this enables us to plan, be better prepared and submit accurate event counts, all of which helps keep convention costs down. ASD's business value to a hotel is measured by a ratio between the total number of sleeping rooms booked inside our group block and the amount of meeting space required. By booking inside the group block you can help maintain our strong business value, which is crucial to our negotiations with cities and cost-containment efforts.

The ASD has a special group rate of **\$189.00 single or double per night**. This special rate is in effect until **May 31, 2018**. However, we suggest you reserve early, as there is a limited number of rooms at the group rate. Please make your reservations directly with the Windsor Court Hotel by **calling (800) 262-2662**. Indicate you are attending the **2018 Academy for Sports Dentistry Symposium**. If you would like to register on line, the reservation link is: **[www.windsorcourthotel.com](http://www.windsorcourthotel.com)** to obtain the special discounted rate enter **Group Code ASD618**.

*Please return form as soon as possible to:*

36th Annual Symposium  
Academy for Sports Dentistry

3085 Stevenson Drive, Suite 200 • Springfield, IL 62703, USA  
[www.academyforsportsdentistry.org](http://www.academyforsportsdentistry.org)

### REGISTRATION CALCULATION BOX

Team Dentist course fee	\$ _____
Symposium registration fee	\$ _____
Package registration fee	\$ _____
Discount for referral program _____%	\$ _____
Additional tickets for optional events	\$ _____
<b>TOTAL AMOUNT ENCLOSED</b>	\$ _____