

THE ARK-LA-TEX ACADEMY OF DENTISTRY

**PRESENTS
REGISTRATION FORM FOR**

IMPLANT RESTORATIVE/SURGICAL

**BY
DR. MAURICE SALAMA DMD**

FRIDAY, NOVEMBER 12, 2010

**CLARION HOTEL
SHREVEPORT, LOUISIANA
PROMPT STARTING TIME 8:30 AM
7 HOURS CONTINUING EDUCATION LECTURE CREDITS**

REGISTRATION TO BE RECEIVED NO LATER THAN

NO LATER THAN NOVEMBER 5, 2010

**MAIL OR FAX TO:
Dr. Clint Bruyere**

PLEASE ENTER YOUR PHONE AND FAX NUMBERS AND ALSO YOUR E-MAIL ADDRESS

(Print Name) _____ [] I WILL ATTEND [] I WILL NOT ATTEND

PHONE: _____ FAX NUMBER _____

EMERGENCY CANCELLATION #'S: HOME # _____ CELL # _____

E-MAIL ADDRESS _____

THESE STAFF MEMBERS WILL ATTEND: (PLEASE PRINT)

1. _____
2. _____
3. _____
4. _____
5. _____

**ALL CANCELLATIONS MUST
BE BY NOVEMBER 5, 2010**

**PLEASE
YOU MUST INCLUDE YOUR CHECK
WITH REGISTRATION**

**Dr. Non-Member Fee: \$245 (Non-refundable - AFTER DEADLINE TO MEETING)
Staff/Lab Tech (each): \$ 45 (Non-refundable - \$55 if not received by deadline) \$ _____.**

The Ark-La-Tex Academy of Dentistry is designated as an Approved PACE Program Provider by the Academy of General Dentistry. The formal continuing dental education programs of this program provider are accepted by AGD for Fellowship/Mastership and membership maintenance credit. Approval does not imply acceptance by a state or provincial board of dentistry or AGD endorsement. The current term of approval extends from May 2008 – June 2012.

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