

# GENEVA DENTAL INSTITUTE 2008 – REGISTRATION FORM

PLEASE PRINT CLEARLY  
Complete one column for each person

Customer ID # _____	Participant:	1	2	3	4
<b>First Name</b> .....	_____	_____	_____	_____	_____
<b>Last Name</b> .....	_____	_____	_____	_____	_____
<b>Title</b> (Dentist, Denturist, Assistant, Tech).....	_____	_____	_____	_____	_____

**To Receive CE Credits please include:**

AGD Membership Number ..... \_\_\_\_\_

**DIPLOMA**

Clearly PRINT names exactly how you would like them to appear on diplomas

\_\_\_\_\_

\_\_\_\_\_

**Confirmation should be sent to:**

Name \_\_\_\_\_

Address City / State / Zip \_\_\_\_\_

Phone / Email \_\_\_\_\_ / \_\_\_\_\_

**Fees of course:**

Dentist .....	\$2250.....	_____	_____	_____	_____
Denturist .....	\$1250.....	_____	_____	_____	_____
Dental Technician ...	\$ 925.....	_____	_____	_____	_____
Auxiliary .....	\$ 395.....	_____	_____	_____	_____
<b>Total.....</b>	<b>\$.....</b>	_____	_____	_____	_____

- **Make check or money order payable to Danilov Dental.** Do not send cash. Payments must be in U.S. funds. Mail your completed registration form and your payment to:

**Geneva Dental Institute of Sacramento**  
5327 Dewey Ave. Fair Oaks, CA 95628

- **To register by Fax** send this form to (916) 967-0016, **or by phone** call (916) 967-0013.

We accept Credit Cards:



Card No. \_\_\_\_\_

Total \$ \_\_\_\_\_ Card Expiration Date: Mo. \_\_\_\_ Yr. \_\_\_\_

**Select Date of 2008 Course:**

March 13-14 **Sacramento CA**     June 26-27 **Sacramento CA**

**Deposit and Cancellation Policy-** Applications will be accepted until three days prior to course date. If space is not available, you will receive a *full refund*. The Geneva Dental Institute reserves the right to cancel courses if enrollment is insufficient. In the event that you must cancel your registration, notify the Geneva Dental Institute in writing. **For each participant, \$50.00 of the total paid is an application fee, which is non-refundable regardless of cancellation date.** The payment of all other fees will be returned if written notice of cancellation is postmarked 30 days prior to seminar date. Due to commitments to faculty and travel plans, applicants who withdrawal after the date of the course forfeits full fees. Your submission of this application along with your payment indicates your acceptance of these terms. A \$25.00 charge will be imposed on all checks returned for insufficient funds. We recommend you keep a copy of the application form for reference.