

# Annual Board Review and Scientific Update

January 22 – 24, 2016

Full Name and Designations \_\_\_\_\_

Preferred Name on Nametag \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country (outside U.S.) \_\_\_\_\_

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

### Registration Rates

Endodontist .....	\$800
Resident or Post-Grad Student .....	\$400
Retired/Disabled .....	\$400
Military (Active Duty) .....	\$500
Full-Time Faculty .....	\$500
Recent Endo Grad (within last 2 years) .....	\$400

### REQUIRED RESPONSES:

I plan to attend the Wine and Cheese Reception on Friday.     Yes     No

Do you have any dietary restrictions? If so, please list them here: \_\_\_\_\_

**CANCELLATION POLICY:** Received before December 18, 2015 less \$100 administrative fee. After December 18, 2015, no refund.

**FAX TO:** 888/426-0381 or 630/517-5964 OR

**MAIL Form to:**                    College of Diplomates  
    P.O. Box 4769  
    East Lansing, MI 48826-4769

**Make Checks Payable to:** *College of Diplomates of the American Board of Endodontics*

**Credit Card Payment:** \_\_\_ Visa    \_\_\_ Mastercard    \_\_\_ Discover    \_\_\_ AmEx

**Name on Card:** \_\_\_\_\_

**Card Number:** \_\_\_\_\_                    **Expiration Date:** \_\_\_\_\_

Questions? Email: [codabe96@comcast.net](mailto:codabe96@comcast.net) or Phone: 630/510-7136

**\*\*\*Please be sure to bring a laptop or tablet with you to view the handouts.\*\*\***