

2017 Golden Triad Seminar
Sponsored by Guilford County Dental Society
Friday, February 24, 2017 – Greensboro Country Club
Register on-line at ncdental.org and click on Meetings and Events, calendar – February 24.

Dentist Registration – PLEASE PRINT

Dentist Name _____
 Address _____
 City & State _____
 Office Phone (____) _____ Email _____

Please provide the email address above where handouts can be sent prior to the meeting if needed.

Additional Dentist and Dental Team Registration
(List additional registrants on additional sheet if necessary)

Name _____ Position _____
 Name _____ Position _____
 Name _____ Position _____
 Name _____ Position _____

Registration Fees*

	<i>Number</i>	<i>Fee</i>	<i>Total Registration Fees</i>
Dentists (registration is per dentist)	_____	x \$285*	_____
Staff Members (registration is per staff member)	_____	x \$255*	_____

**Includes continental breakfast and lunch*

Total Fees Due _____

Payment Information

I wish to pay by check payable to **Guilford County Dental Society.**

Enclosed please find my check.

Mail to:

Golden Triad Seminar
 c/o North Carolina Dental Society
 1600 Evans Road
 Cary, NC 27513

I wish to pay by credit card. Please charge my VISA MasterCard American Express

PLEASE PRINT!

Card # _____ Expiration Date ____/____ CVV Code _____
 Name on Card _____ Zip Code of billing address _____

Signature authorizing charges to this card _____

Questions? Call 919-234-4027 or email pallen@ncdental.org