

## 2021 SPEED DATING FOR THE NEW DENTIST AND RESIDENT HIRING DENTIST REGISTRATION FORM

**October 19, 2021 • 6-8pm • Brae Loch Inn • Cazenovia, NY**

**----- Limited Space Available ----- \$100 Registration Fee**

***You Must Be PreRegistered - No Walk-Ins***

**Dentist Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**In my stead, please register my associate/partner:** \_\_\_\_\_

### Payment Information

#### **\$100 Registration Fee**

Check enclosed made payable to: Fifth District Dental Society

MasterCard       Visa       American Express

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Amount \_\_\_\_\_

Print Name of Cardholder \_\_\_\_\_ Signature \_\_\_\_\_

Cardholder Email \_\_\_\_\_ Cardholder Address: \_\_\_\_\_

(receipt of payment emailed to this address)

(if different from above)

### **Return by October 12th:**

**Fifth District Dental Society**

6323 Fly Road, Suite 3, E. Syracuse, NY 13057

Tel. (315) 434-9161 • Fax. (315) 437-6013 • Email: [kbowers@5dds.org](mailto:kbowers@5dds.org)