

WEST COAST DENTAL IMPLANT STUDY CLUB



TABLE EXHIBIT REGISTRATION 2012

Table exhibit displays must be appropriate for a professional meeting. Registration acceptance for exhibits will be at the discretion of the Program Committee. Companies may register by completing the registration information below. The registration must be completed and payment received prior to the meeting date.

The 2012 Club Program

Exhibit Fee: \$500.00 per Full Day Meeting (Saturday or Sunday)
\$300.00 per Evening Meeting (Thursday)

_____ Saturday March 10	Dr Neil Meredith
_____ Sunday April 22	Dr Paul Weigl
_____ Thursday May 17	Dr Jin Kim
_____ Saturday May 19	Dr Jin Kim
_____ Thursday June 7	Dr Jin Kim
_____ Thursday August 9	Dr Bach Le
_____ Thursday September 6	Dr Ryan Cook
_____ Saturday October 13	Dr Scott Ganz

_____ Attend all 8 sessions for \$2,900.00 (saving of \$300)

Two company representatives will be allowed per company. The exhibit fee includes food and refreshments.

Company Name _____

Company Contact _____

Em ail _____ Phone _____

On Site Representative _____

Em ail _____ Phone _____

Address _____

City, State, Zip _____

Payment by check is preferred; however, Visa and/or MasterCard are accepted.

Enclosed is a check in the amount of, (or process our payment in the amount of) \$ _____

Visa/MasterCard # _____ Exp. Date _____

Cardholder's Name _____ 3-digit Code _____

Cardholder's Billing Address _____

Cardholder's Signature _____

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