

# Conference Registration

2016 Southwest Conference & Expo

April 7th-10th, 2016

Omni Mandalay Hotel at Las Colinas ☆ Irving, Texas

Please Print Legibly - Retain a copy for your records

## Submit To:

DLAT  
P.O. Box 118932  
Carrollton, Tx 75011  
Phone/Fax: 800-376-2955  
Email:  
2016Conference@dlat.org

## Attendee Information:

Name: \_\_\_\_\_  CDT  RG  DDS Number\*: \_\_\_\_\_

Company Name \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ (Required to receive a receipt)

Services offered:  Crown & Bridge  Complete Dentures  Orthodontics

Ceramics  Cast Partials  Full Service

## Additional Registrations From Company:

Name: \_\_\_\_\_  CDT  RG  DDS Number\*: \_\_\_\_\_

Name: \_\_\_\_\_  CDT  RG  DDS Number\*: \_\_\_\_\_

Name: \_\_\_\_\_  CDT  RG  DDS Number\*: \_\_\_\_\_

\*Used for CE Tracking purposes

## Registration: Please check which one that applies to you.

<b>Full Registration:</b> <input type="checkbox"/> DLAT member \$175x__=\$_____ <input type="checkbox"/> Non-Member \$275x__=\$_____  <b>Same Price for one day or both!</b>	<b>Includes all clinics both days (except CPR and Hands-On Clinics)</b> <ul style="list-style-type: none"><li>• Exhibit Hall,</li><li>• Friday Night Reception,</li><li>• Saturday Awards Luncheon</li><li>• Hospitality Suite both nights</li></ul>	<b>Friday:</b> <ul style="list-style-type: none"><li>• Breakfast on your own</li><li>• Keynote Speaker</li><li>• Non-Members: Lunch on your own</li></ul> <b>Members: (Lunch provided in DLAT Business meeting)</b> <b>Saturday:</b> <ul style="list-style-type: none"><li>• Breakfast on your own</li><li>• Vendor day (4hr CE)</li><li>• Awards Luncheon</li><li>• Breakout Classes</li></ul>
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On-Site Registration: You are assessed a late fee as follows - Full Registration \$50

<b>Registration Options:</b> <input type="checkbox"/> CPR Course \$55.00 <input type="checkbox"/> Hands-on Course \$TBA	<b>Special Events:</b> <b>Fees for Guests not included in Registration:</b> <input type="checkbox"/> Golf Tournament - Thursday \$100.00 <input type="checkbox"/> DLAT Luncheon(Member's Guest) - Friday \$50.00 <input type="checkbox"/> Awards Luncheon - Saturday \$50.00
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<b>Payment Options:</b> Check Number: _____ Make Payable to: <b>DLAT</b> Credit Card Number _____ Exp. Date: _____ CVC: _____ Name on Card: _____ Address for card:(if different) _____ City: _____ State: _____ Zip: _____  Signature _____ Date _____  <i>No pre-registrations accepted after March 31, 2016</i>	<b>Registration Totals:</b> <b>Registration Total:</b> <input type="checkbox"/> Member \$_____ <input type="checkbox"/> Non-Member \$_____  <b>Registration Options:</b> <input type="checkbox"/> CPR x_____ \$_____  <b>Special Events:</b> <input type="checkbox"/> Golf x_____ \$_____ <input type="checkbox"/> Lunch Fri. x_____ \$_____ Sat. x_____ \$_____  <b>Total:</b> \$_____
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**Cancellation Policy:** Written Notification is Required for all refunds. Requests received prior to March 20, 2016, will receive a refund less a \$15.00 administrative fee. No Refunds issued after March 20, 2015.

**Contact the DLAT for Special Needs:** 800.376.2955 or 2016conference@dlat.org