



Pharmacotherapy Considerations in Dentistry

FRIDAY
MAY 24
2019

available live at MAHEC or via videoconference

REGISTRATION: 8:30am - 9:00am
PROGRAM: 9:00am - 12:15pm

REGISTRATION

Early registration deadline: May 17, 2019

The early registration fee is \$90.00 for dentists, \$60.00 for hygienists/assistants, \$30.00 for AB Tech CC Allied Dental faculty, \$20.00 for students (proof of enrollment required at check-in), and \$5.00 for MAHEC employees. The program fees include administrative costs and educational materials. If registration is received after the deadline, the total fee will be the registration fee + \$15.00.

MAHEC has a pay-up-front policy for all CE programs. The only exceptions will be for pre-approved programs where an individual payment plan is appropriate. Registrations received without accompanying payment will not be processed and participants who have not paid the course fee will not be admitted into the program.

Cancellations received at least two weeks in advance of the program date will receive a full refund unless otherwise noted. Cancellations received between two weeks and up to 48 hours prior to the program date will receive a 70% refund unless otherwise noted. No refunds will be given for cancellations received less than 48 hours prior to the program date. All cancellations must be made in writing (fax, mail, or email). Substitutes can be accommodated in advance of the program.

Updated contact information.

NAME _____

CREDENTIALS _____

SOCIAL SECURITY # XXX-XX- ____ ____ ____ (last 4 digits required)

OCCUPATION _____

EMAIL ADDRESS _____

HOME ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

HOME COUNTY _____

HOME # _____ **WORK #** _____

EMPLOYER _____

DEPARTMENT _____

EMPLOYER'S ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

WORK COUNTY _____

Program announcements will be sent to your email unless you opt out from receiving MAHEC emails. We never share our mailing lists.

Please remove my name from the MAHEC mailing list.

I WILL ATTEND: Live at MAHEC Via Videoconference

Location: _____

MAHEC has the ability to provide a videoconference of this event to other satellite locations in the MAHEC region. Please contact the [planner](#) of the course to arrange a videoconference.

DENTISTS: \$90.00 \$105.00 (after May 17th)

**HYGIENISTS/
ASSISTANTS:** \$60.00 \$75.00 (after May 17th)

**AB TECH CC ALLIED
DENTAL FACULTY:** \$30.00 \$45.00 (after May 17th)

STUDENT: \$20.00 \$35.00 (after May 17th)

(Student proof of enrollment required at check-in)

MAHEC EMPLOYEE: \$5.00 \$20.00 (after May 17th)

Full payment must accompany all submitted registrations unless a payment plan has been approved in advance. Registrations received without accompanying payment will not be processed.

Check is enclosed Credit card information provided

Visa MasterCard Discover Card American Express

ACCOUNT # _____

EXP ____ / ____ **CODE ON BACK OF CARD** _____ (3 digits)

NAME ON CARD _____

SIGNATURE _____

Send completed registration form to: # 19DE012/58019
MAHEC Registration
121 Hendersonville Rd., Asheville, NC 28803 **Fax to:** 828-257-4768

HAVE A QUESTION?
Contact the Program Planner
Rosalyn Wasserman, PT, DPT
rosalyn.wasserman@mahec.net or 828-257-4437



Special Services
828-257-4485

REGISTRATION INFORMATION: 828-257-4475
FAX REGISTRATION: 828-257-4768
ONLINE REGISTRATION: www.mahec.net
EMAIL: registration@mahec.net
MAIL: MAHEC Registration
121 Hendersonville Rd., Asheville, NC 28803

MAHEC assumes permission to use audio, video and still images from this program for promotional and educational purposes. Please speak with a staff member if you have any concerns.



Stay connected! Follow us on Facebook: @MAHECED

