

SYMPOSIUM REGISTRATION FORM

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47th Annual Symposium of the Holistic Dental Association MEETING REGISTRATION

*NOT AN HDA MEMBER? NEW MEMBERSHIP SPECIAL \$195 WITH MEETING REGISTRATION
REGULAR YEARLY FEE IS \$295*

Name: _____ Degree _____ New Member _____

Address: _____

City _____ State _____ Zip _____

Phone: _____ Email: _____

AGD ID# _____ State and License # _____

Auxiliaries accompanying Doctor—Name Tags Required

WORKSHOP -- THURSDAY ONLY

Attendee \$600

Office Auxiliary \$425

Thursday-Friday April 11--12

Attendee \$875

Office Auxiliary \$575

Friday Saturday April 12 & 13

Attendee \$800

Office Auxiliary \$525

3 Day Symposium Thurs-Fri-Saturday

Attendee \$995

Office Auxiliary \$625

IF YOU ARE ATTENDING ON THURSDAY

CIRCLE **ONE** All-Day WORKSHOP **A or B**

OR CIRCLE **ONE AM** & **ONE PM** WORKSHOP

A) 8AM-5PM Holistic Dentistry 101

Bernice Teplitsky DDS

B) 8AM-5PM Applied Kinesiology for Dentists

& Their Patients James Kennedy DDS

AM 8AM-12PM Traditional East Asian Medicine Tongue
Diagnosis for Dentists Sina Smith MS, MA, LAc, MD

AM 8AM-12PM Dental Decoding-Theoretical &
Practical Approach Fabián Brotos DDS

PM 1-5PM Ayurveda in Dentistry & Integrative Health
Kalpna Ranadive DMD, NMD, MDS, IBDM

PM 1-5PM Detoxification for Recovery, Vitality &
Longevity Christopher Shade PhD

Date _____ Payment \$ _____

Check# _____

Check payable to Holistic Dental Association

Credit Card: Visa MC AmEx

Credit Card Number

Expiration: _____ CVV _____

Signature

Return the Registration to:
director@holisticdental.org

Or mail to: Holistic Dental Association
1825 Ponce de Leon Blvd #148
Coral Gables, FL 33134

Or Register by Phone -- 305-904-4346

Call or email for more information