



## Sonick Seminars Registration Form

Name (PLEASE PRINT) \_\_\_\_\_

Street Address (PLEASE PRINT) \_\_\_\_\_

City \_\_\_\_\_

ST \_\_\_\_\_

ZIP \_\_\_\_\_

Email Address (PLEASE PRINT) \_\_\_\_\_@\_\_\_\_\_

**Practice Specialty** (Check all that apply)

- General Practitioner    Periodontist    Prosthodontist    Oral Surgeon    Endodontist    Laboratory  
 Other

**Courses Available**

Implant and Periodontal Plastic Surgery in the Esthetic Zone

December 3-4, 2009

Bone Regeneration for Ideal Implant Placement

April 1-2, 2010

Over-the-Shoulder

Request dates with office

**Payment Method**

- Sonick Seminar Course @ \$2,995    Over-the-Shoulder Course @ \$1,995

**Auxiliary Staff Member @ \$695**

- Check    MasterCard    VISA    American Express    Discover

Credit Card Number: \_\_\_\_\_ Exp. Date (MM/YY): \_\_\_\_\_

Print Card Holder's Name \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

A \$1000 deposit is required at registration for doctor participants. The balance is payable at least 30 days prior to the course. Cancellations must be made at least 30 days prior to the course to receive a refund; otherwise, the \$1000 deposit will be forfeited. Course tuition include, a technical training booklet, research articles, professional information packets, special product discounts, and a certificate of course completion. Also included are breakfast and lunch on Thursday and Friday, and a synergistic group dinner on Thursday evening.

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