



KDLA Bluegrass Technical Symposium Registration
Your Ticket to a Teamwork Opportunity
March 12-13, 2010

Please print. Please make copies for each registrant.

- CDT Specialty:**
 Crown & Bridge
 Ceramics
 Ortho
 Complete Dentures
 Partial Denture
 Implants

Name: _____ CDT/RG# _____

Home Address _____

City _____ State _____ Zip _____

Company /Lab Name/School/ Dental Office:

Address _____

City _____ State _____ Zip _____

Day Phone _____ Fax _____

Email _____

Position: Lab Owner Lab Tech Manager Staff Student
 Dental Assistant Dental Hygienist Dentist

Registration Fees:

- KDLA Members (Membership ID Required) - \$200.00 \$ _____
 (No Manufacturer/Suppliers)
 Students (Copy of ID Required) - \$100.00 \$ _____
 All Others (No Manufacturer/Suppliers) - \$250.00 \$ _____
 Spouse **Lunch (\$30.00) / Dinner (\$40.00)** \$ _____
 Late Fee After March 1st - Add \$50.00 \$ _____

Price include: All Clinics include: Friday Lunch and Dinner,
 Saturday Lunch, and Exhibit Area **TOTAL DUE \$ _____**

Payment only by Check, Cash or Money Order

MAKE CHECKS PAYABLE TO KDLA

Do you need Special Assistance? YES or NO

Lunch/Dinner Selections:

Friday Lunch (Pick One) Both Choices come with a Salad, Rolls, Dessert

- ____ Penne Pasta Topped with Grilled Vegetables _____ Grilled Chicken Breast with Tomato Jam
 _____ Vegetable Medley and Oven Roasted Potatoes

Friday Dinner (Pick One) All Choices come with a Salad, Rolls, Oven Roasted Potatoes, Steamed Asparagus and dessert.
 Drinks: Tea, Water and Coffee.

- ____ Peppercorn Striploin _____ Potato Crusted Halibut _____ Almond Crusted Chicken

Saturday Lunch (Pick One) All Choices come with Fruit Cocktail, Rolls, and Dessert

- ____ Salad topped with Grilled Chicken _____ Salad topped with Steak
 Choice of Dressings: Caesar or Red Wine Vinaigrette

Cancellations:

Refund requests received prior to March 1st, 2010, will be given less a \$25.00 administration fee. No refunds will be given after March 1, 2010.

Please circle clinics you plan to attend:

- F1 F2 F3 F4 F5 F6 S1 S2 S3 S4 S5 S6
 F7 F8 F9 F10 F11 S7 S8 S9 S10 S11

*Register by mailing this form by
 March 1, 2010 to:*

KDLA
PO BOX 72338
Newport, KY 41072-0338
Phone: 859-781-4600