Register online at AAOMS.org/DIC

In-person Conference with Online Access Registration Form

AAOMS Dental Implant Conference and Preconference Courses | Dec. 4 – 6 | Sheraton Grand Chicago Riverwalk | Chicago, Ill.

Registrant AAOMS ID Number_____ *Please print or type. A separate registration form must be completed for each attendee.*

First Name | Middle Initial | Last Name | Degree(s) | Nickname

Practice Name

Practice Address | City | State/Province/County | ZIP/Postal Code | Country

Practice Phone | Fax | Email *(A unique email address is required for each registrant.)*

Spouse/significant other *(No fee required unless spouse requires CE credit.)*

First Name | Last Name

Emergency contact information

Name | Relationship | Phone ❒ Cell ❒ Home ❒ Work

❒ Check if special accommodations are required for any member of your party.

General Registration Fees

Registrant: Check proper category. All fees are listed in U.S. dollars.

	Through Oct. 31	After Oct. 31 and onsite
❒ AAOMS fellow/member/provisional/ affiliate/candidate/applicant/retired/life	$ 875	$ 975
❒ General dentist/other dental professional *To receive $250 off the general registration fee, enter promo code provided _____ and AAOMS member name _____*	$1,125	$1,225
❒ U.S. OMS who is not a member of AAOMS	$2,510	$2,610
❒ AAOMS resident member/U.S. dental student	$ 350	$ 400
❒ International resident	$1,125	$1,225
❒ International OMS who is not a member of AAOMS	$1,125	$1,225
❒ International general dentist/ other dental professional	$1,125	$1,225
❒ Other professional staff of an AAOMS member (U.S. only)	$ 425	$ 475
❒ AAOMS allied staff member	$ 350	$ 400
❒ Spouse of an AAOMS member earning CE credit	$ 350	$ 400

Preconference Courses (only one selection allowed)

All preconference attendees also must register for the Dental Implant Conference. Choose only one. (To attend one preconference course in-person and access any of the didactic preconference courses on-demand, email registration@aaoms.org.)

Dec. 4 | 1 – 4:30 p.m.

*The following **didactic preconference courses** are available to all conference registrants EXCEPT allied staff members, other professional staff and spouses:*

❒ P01 – Elite Practice Growth: Direct to Consumer Strategies vs. Referral-Based Patient Acquisition $300

❒ P02 – Latest Developments in Comprehensive Digital Workflow $300

*The following **hands-on preconference workshops** are available ONLY to AAOMS fellows/members and AAOMS resident members:*

❒ P03 – Managing the Loose Implant Restoration and Fractured Abutment Screws $500

❒ P04 – Evidence-Based Integration of Soft-Tissue Alternatives (STAs) and Biologic Modifiers into Daily Practice $500

❒ P05 – Zygomatic Implant Placement Fundamentals Using 3D Models: The ZAGA Concept in Practice $500

Total Due $_____

Professional Background (choose one)

❒ AAOMS fellow/member
❒ OMS who is not an AAOMS member
❒ Prosthodontist
❒ General dentist
❒ Other staff of an AAOMS member
❒ Other dental specialist _____
❒ OMS resident/dental student
❒ Periodontist
❒ Lab technician
❒ AAOMS allied staff member

I agree to share my data, including my full name and mailing address, with corporate supporters and exhibitors of this conference.
❒ Yes ❒ No

Lunch and Learn *(free to attendees)*

Visit AAOMS.org/DIC for description. No CE credit offered. Please indicate your intention to attend by checking the box below. Space is available on a first-come, first-served basis onsite. Food and beverage will be served for those in attendance.

Dec. 4 | 11:15 a.m. – 12:45 p.m. ❒ Osteo Science Foundation (GPT1)

Industry Symposium *(free to attendees)*

Visit AAOMS.org/DIC for description. No CE credit offered. Space is available on a first-come, first-served basis onsite.

Dec. 4 | 4:45 – 6:15 p.m. ❒ To be announced (GCF1)

Payment Information

Credit Card ❒ American Express ❒ Discover ❒ MasterCard ❒ Visa

Credit Card Number | Security Code | Expiration Date

Name of Cardholder | Signature

Credit Card Billing Address

City | State/Province | ZIP/Postal Code

Payment of Fees

Return your registration form(s) with payment in U.S. dollars as follows:

- Completed credit card information or check (made payable to AAOMS) can be mailed to: AAOMS, Attn: Registration, 9700 W. Bryn Mawr Ave., Rosemont, IL 60018-5701
- If paying by credit card, you also can submit by secure fax to AAOMS at 847-678-6279.

Registration forms must be received no later than Dec. 3. Cancellation notification must be made in writing. See cancellation of registration and refunds policy on the Registration page at AAOMS.org/DIC.

You will receive an email confirmation of your registration once it has been received and accepted by AAOMS. Badges will be mailed prior to the conference. Attendees who register after Oct. 31 must pick up their badges and tickets onsite at the AAOMS Registration Center.

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