



NATIONAL DENTAL HYGIENISTS' ASSOCIATION

48TH ANNUAL CONVENTION

Hilton Hawaiian Village Beach Resort and Spa

July 16 – July 21, 2010

REGISTRATION FORM

BADGES ARE REQUIRED FOR ADMISSION TO ALL NDHA/NDA FUNCTIONS

(PLEASE PRINT CLEARLY)

Name (First, Middle, Last)		Date of Birth (Mo/Day)	
Address			
City, State & Zip Code		Email Address	
Home Phone No	Cell Phone No		
Dental Hygiene School Attended	State	Year of Graduation	
Credentials: (e.g. BS, MS, PhD)			
Dental Hygiene Licensure Number	State	Dental Hygiene Licensure Number	State

MEMBERSHIP DUES (Cycle: July 1, 2010 - June 30, 2011)

_____ \$125.00 National Dues	_____ \$ 50.00 Lifetime Member
_____ \$ N/C Courtesy Members-New Grad	_____ \$ N/C Honorary Member
_____ \$ 35.00 Undergrad. Dental Hyg. Student	_____ \$ 75.00 Retired Member

MEMBER/NONMEMBER REGISTRATION FEE INCLUDES

Admission to all NDHA/NDA Scientific sessions, Get Acquainted Activities, the NDHA President's Breakfast, the NDHA Fundraiser, the NDA Opening Session, Technical Exhibits, and Table Clinics.

A registration badge is required for admission to all events.

REGISTRATION FEES

	Before June 27, 2010	After June 27, 2010
NDHA MEMBERS	\$ 250.00 <input type="checkbox"/>	\$ 275.00 <input type="checkbox"/>
NDHA NON-MEMBERS	\$ 395.00 <input type="checkbox"/>	\$ 425.00 <input type="checkbox"/>
UNDERGRAD STUDENT MEMBERS*	\$ 60.00 <input type="checkbox"/>	\$ 60.00 <input type="checkbox"/>
GUESTS* (Non-Dental Professionals)	\$ 25.00 <input type="checkbox"/>	\$ 25.00 <input type="checkbox"/>
Additional Get Acquainted Tickets	\$ 40.00 <input type="checkbox"/>	\$ 40.00 <input type="checkbox"/>
Additional President's Breakfast Tickets	\$ 60.00 <input type="checkbox"/>	\$ 60.00 <input type="checkbox"/>
Additional Fundraiser Tickets	\$ TBA <input type="checkbox"/>	\$ TBA <input type="checkbox"/>

*Doesn't include Fundraiser and President's Breakfast tickets

Membership Dues: \$ _____

Please indicate your total remittance: \$ _____

Need a roommate? Yes No

*****There will be no refunds after July 1, 2010*****

Credit Card Payment: (check one) Visa MasterCard American Express

FAX Credit Card information listed below to ATTN: Gail Woodson-Stamps 248.996.6286

Name as it appears on card: _____

Address of card holder: _____

Card #: _____ Expiration Date: (mo./yr.) _____

Amount: \$ _____ Authorization Signature: _____

PLEASE MAKE CHECKS PAYABLE TO:

National Dental Hygienists' Association
 c/o Gail Woodson-Stamps, Financial Secretary
 17460 Redwood Ave
 Lathrup Village, MI 48076

www.ndhaonline.org

248.761.2088



NDHA DONOR HONOR ROLL CALL

Participating in the NDHA Donor Honor Roll Call is an excellent way to collaborate with our diverse dental hygiene community. Your support will assist in promoting the art and science of dental hygiene through student scholarships. Your company name/logo will be recognized on all of our promotional literature.

PLATINUM

\$5,000.00

GOLD

\$4,000.00

SILVER

\$3,000.00

BRONZE

\$2,000.00

Please include business card for website advertisement if desired for all above

\$1,000.00 or less

Name will be listed on website as a patron

<u>Level of Donation:</u>	<u>Amount of Donation Enclosed:</u>
_____ Platinum	\$ _____
_____ Gold	\$ _____
_____ Silver	\$ _____
_____ Bronze	\$ _____
_____ Patron	\$ _____

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