



CHICAGO IMPLANT INSTITUTE
Mentoring · Educating · Advancing

Continuum in Implant Dentistry 2021/2022 REGISTRATION FORM

Participant Name: _____ NPI #: _____
Address: _____
City: _____ State/Prov: _____ Zip/Postal: _____
Phone: _____ Fax: _____ Email: _____

I heard about this course from:

Colleague Ad / Journal / Mailing Website Other _____

COURSE DATES:		COURSE FEE: \$19,000
October 21-24, 2021	March 3-6, 2022	\$2000 deposit due at time of registration
November 11-14, 2021	April 7-10, 2022	
January 6-9, 2022	May 19-22, 2022	
February 10-13, 2022	June 9-12, 2022	
Please contact us for special tuition fees for recent graduates, students, and military.		

Visa/Mastercard: _____ - _____ - _____ - _____ Expiration Date ____/____/____ CVD Code _____

Cardholder Name _____ Signature _____

Billing Address (if different than above): _____

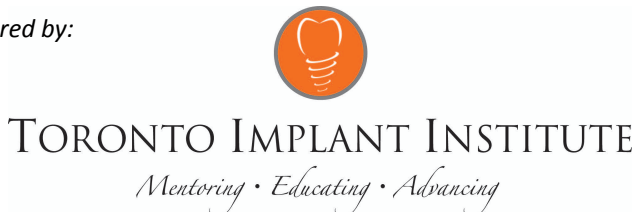
I agree to pay the above Course Fee according to the card issuer agreement. Payment will be applied to the credit card provided upon registration. \$2000 deposit due at time of registration. Remaining balance will be processed 3 weeks prior to the start of the program. Payment plan available - please contact us for details.

Call, Fax or Email Registration to:

Phone: 416-566-9855
Fax: 647-748-3551
Email: info@chicagoimplantinstitute.com
Contact person: Linda Shouldice

Refund and Cancellation Policy: Cancellations made less than 2 months prior to the course are subject to a non-refundable deposit of \$2000.

Course Sponsored by:



Toronto Implant Institute Inc.
Nationally Approved PACE Program for FAGD/MAGD credit.
Approval does not imply acceptance by any regulatory authority or AGD endorsement.
11/01/2019 to 10/31/2022
Provider ID# 302926