

# Clinical Advances

## Registration Form *(For payment via check only)*

### REGISTRATION FEES

- **Dentists before April 26 - \$545 ~ Dentists after April 26 - \$595**
- **Staff before April 26 - \$295 ~ Staff after April 26 - \$345**

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<b>Name</b>	<b>First</b>	<b>Middle</b>	<b>Last</b>	<b>Degree</b>
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**Street**

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<b>City</b>	<b>Georgia County</b>
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<b>State</b>	<b>Zip Code</b>
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<b>Phone Number</b>	<b>Fax Number</b>	<b>E-mail Address</b>
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**Specialty**

**PLEASE NOTE: Due to new credit card processing guidelines our policies and procedures have changed. We can no longer accept mailed or faxed registrations with credit card information.**

**Online registration is preferred. Registering online via credit card is quick, simple and secure. Please visit the web address below to register today!**

**[augusta.edu/pace/healthcare/dental/clinicaladvances](http://augusta.edu/pace/healthcare/dental/clinicaladvances)**

**Send Registration Form to:**

Division of Professional and  
Augusta University  
Attn: Jessica Wells  
1120 15<sup>th</sup> Street, FI-1083  
Augusta, Georgia 30912