

AEEDC Dubai CONFERENCE REGISTRATION FORM

Title: Dr. Mr. Mrs. Ms. Date / /
 (Please write the name in BLOCK letters) **Note:** The name mentioned below will appear the same in the certificate of attendance

Name _____

Institution (Hospital / Clinic) _____

Designation _____

Address _____ P.O. Box _____

City _____ Country _____

Tel _____ Mobile _____

Fax _____ E-mail _____

Category	Pre-Registration After 31 st Oct. 2010 - 24 th Jan. 2011	Registration After 24 th Jan. 2011- Onsite
<input type="checkbox"/> Dentist	US\$ 245 / AED 900	US\$ 300 / AED 1100
<input type="checkbox"/> Dental Assistant/Hygienist Nurse/Technician	US\$ 165 / AED 600	US\$ 220 / AED 800
<input type="checkbox"/> Dental Student	US\$ 110 / AED 400	US\$ 135 / AED 500

Entitlements:

- Certificate and Conference Materials.
- Admission to IADT Symposium in Oral Traumatology, 1 - 2 February 2011.
- Admission to GCC Preventive Dentistry Conference, 3 February 2011.
- Admission to open workshops/demonstrations inside the exhibition halls*

*Subject to seat availability

NOTE:

- Student, Nurse and Technician must provide a valid ID card upon registration.
- If VISA is required, kindly send the Visa Application Form and a Valid Passport Copy along with this form, form can be downloaded from www.aeedc.com. Medical Insurance is mandatory to any person travelling to the United Arab Emirates as per the new directives issued by the Dubai Immigration Authorities. Medical Insurance costs US\$20 / AED 60 as indicated in the Visa Application Form.
- Registration to AEEDC Dubai is for the duration of the conference. This entitles conference participants access to all conference and exhibition halls. This does not guarantee the conference participants a seat at any particular scientific session or open workshop/demonstration inside the exhibition halls. We recommend early arriving or seat reservation where applicable, in order to prevent disappointments.
- The conference participants should understand that the conference speakers provide only their perspective of any new techniques and procedures; and potential risks might be possible if it is applied into clinical practice without sufficient education, training and/or supervision.

PAYMENT can be made either by cash or credit card to: INDEX® Conferences & Exhibitions Organisation Est.

PAYMENT DETAILS: Cash Visa Master Card

Credit Card No. Expiry Date /
MONTH YEAR

Name on Card _____

AUTHORIZATION NOTE

Please debit my credit card with an amount of AED..... I,the card holder will honor this transaction and not hold INDEX® Conferences & Exhibitions Organisation Est. responsible if the credit card number has been compromised.

CANCELLATION POLICY

I understand that the above mentioned charges per registration will be non-refundable.

Date..... Signature.....

For Registration, contact:
 Tel: +971 4 3624717
 Fax: +971 4 3624718
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michael.cadano@index.ae