

Warschaw Learning Institute Presents
"Interactive CDT 2009 Dental Coding Experience"

Pickwick Gardens in Burbank, CA.

Saturday, January 31, 2009 (7:30am-4:00pm)

**** LIMITED SPACE REGISTER TODAY ****

Please print or type the following registration form.
Your confirmation email will arrive within 24 hours of receiving your payment.

Dentist Name: _____
Address: _____
City: _____
State and Zip: _____
Office Phone and Fax: _____
Office Email: _____
Contact Person & Title: _____
Specialty: _____

Participants: (\$285 pp 1st & 2nd) (\$265 pp for 3+)

#1 Name and Title: _____ License#: _____
#2 Name and Title: _____ License#: _____
#3 Name and Title: _____ License#: _____
#4 Name and Title: _____ License#: _____
#5 Name and Title: _____ License#: _____
#6 Name and Title: _____ License#: _____

Mail to: Warschaw Learning Institute 4924 Balboa Blvd. #460, Encino, CA. 91316 Call (323) 822-0917 / Fax (888) 822-0917

Name on Card: _____ Signature: _____

Billing Address, City, State, Zip : _____

Credit Card No : _____ Exp. Date: _____

Check: Routing # _____ Bank Account# _____

Name of Bank _____ Account Name _____

Please fill out billing address above Total \$ _____

Cancellation Policy: Refunds prior to 11/30/08 (\$50 non-refundable)

No refunds after 12/01/08