

COURSE SCHEDULE

9:30 AM

Registration

10:00 AM – 12:00 PM

Lecture*

12:00 PM – 1:00 PM

Lunch

1:00 PM – 4:00 PM

Lecture*

4:00 PM – 5:00 PM

Wine/Cheese Reception

*Includes coffee break

REGISTRATION FEE

\$398

Includes coffee breaks, lunch, and an autographed copy of Dr. Miles' new book *Color Atlas of Cone Beam Volumetric Imaging for Dental Applications*

CONTINUING DENTAL EDUCATION CREDIT

Attendees of the Seminar will receive 5 hours of CE credit



Quintessence Publishing Co Inc is an ADA CERP-Recognized Provider

HOW TO REGISTER

- Register online at www.quintpub.com/seminar, or
- Mail your form and check (payable to Quintessence Publishing Co Inc) for the registration fee to Quintessence Publishing at the address below, or
- Fax your form with credit card information (Visa, MasterCard, American Express, or Discover) to Quintessence at 630-736-3633, or
- On-site registration will be accepted only on the basis of space availability and thus cannot be guaranteed. Early advance registration is strongly recommended.

HOTEL REGISTRATION

There are two local hotels. Call the hotel reservation desk directly.

Hilton Indian Lakes Resort, Bloomingdale

\$99 per night (be sure to indicate you are attending Quintessence meeting to receive this special rate)
(630) 529-0200 www.hiltonindianlakes.com

Westin Chicago Northwest, Itasca

Approx \$149 per night/weekend rates may apply
(630) 773-4000
www.westin.com/northwestchicago

Visit www.quintpub.com to obtain driving directions to the hotels and the Quintessence office.

REGISTRATION FORM

I WOULD LIKE TO ATTEND

One-day lecture presented by Dale Miles US \$398

NAME _____

ADDRESS _____

CITY _____

STATE _____ ZIP _____

EMAIL _____

TELEPHONE _____ FAX _____

General practitioner Oral surgeon Periodontist Prosthodontist Other _____

PLEASE CHECK HERE IF YOU NEED INFORMATION ABOUT:

- Transportation from the airport to Quintessence
- Transportation from the hotel to Quintessence

PLEASE CHECK ONE:

- Check enclosed
- Charge to: (circle one)
Visa / MasterCard / American Express / Discover

CARDHOLDER'S NAME _____

CREDIT CARD NUMBER _____

EXPIRES _____

SIGNATURE _____