



JDA NON-MEMBER REGISTRATION FORM

JAMAICA DENTAL ASSOCIATION ANNUAL CONVENTION

FEBRUARY 10, 2019 – THE JAMAICA PEGASUS, KINGSTON

FEBRUARY 13-16, 2019 - MOON PALACE JAMAICA GRANDE RESORT, OCHO RIOS

CONFERENCE REGISTRATION:

DR/MR./MRS./MISS: _____ LAST NAME: _____ FIRST NAME: _____

ADDRESS (mailing): _____

TELEPHONE: () OFFICE/CELL/FAX _____ / _____ / _____

E-MAIL (OFFICE AND PERSONAL) _____ ORGANIZATION: _____

PAYMENT FOR CONFERENCE FEE may be made Online, by credit card or by certified cheque payable to Jamaica Dental Association. Cheque payments in Jamaican Dollars should be converted, on the date of payment using the latest [Bank of Jamaica Monthly Average Exchange Rate](http://www.boj.org.jm/foreign_exchange/fx_rates_monthly.php) http://www.boj.org.jm/foreign_exchange/fx_rates_monthly.php.

ADDRESS FOR CHEQUES: (Overseas) Jamaica Dental Association, KIN1121, P.O. Box 025580, Miami, FL 33102-5580. **EARLY EARLY BIRD RATE APPLICABLE FOR PARTICIPANTS WHO REGISTER AND PAY IN FULL BEFORE: 20 NOVEMBER 2018 AND EARLY BIRD RATE APPLICABLE BY 21 JANUARY 2019.**

DO YOU GIVE PERMISSION FOR YOUR CONTACT INFORMATION TO BE SHARED WITH EXHIBITORS? YES NO

CONVENTION REGISTRATION FEES 2019

DESIGNATION	EARLY EARLY BIRD – US\$ APPLICABLE BEFORE NOVEMBER 20, 2018	EARLY BIRD FEE – US\$ APPLICABLE BEFORE JANUARY 21, 2019	REGULAR FEE – US\$ APPLICABLE AFTER JANUARY 21, 2019
DENTAL SURGEON	\$675.00	\$750.00	\$800.00
ONE DAY ONLY /TWO DAYS ONLY*	\$400.00/\$575.00	\$475.00/\$600.00	\$500.00/\$650.00
DENTAL AUXILIARIES (DENTAL ASSISTANTS/ OFFICE STAFF)	\$300.00	\$325.00	\$350.00
DENTAL HYGIENISTS	\$450.00	\$475.00	\$525.00
DENTAL TECHNICIANS	\$375.00	\$425.00	\$475.00
DENTAL STUDENTS **	\$150.00	\$200.00	\$225.00
POST GRADUATES/INTERN (ADVANCED SPECIALTY AND GENERAL DENTISTRY) ***	\$200.00	\$225.00	\$250.00

*For all One- and Two-Day Registrants – Social Events are not included. Please indicate on the form whether you plan to attend or not.

** All students must furnish proof of academic enrollment in order to register. *** Upon presentation of current contract

Any Dentist who would like to become a JDA MEMBER (LOCAL DENTISTS) OR JDA AFFILIATE MEMBERS (OVERSEAS DENTISTS), please contact The Dental House at 876-927-9875

FULL CONVENTION REGISTRATION FEES INCLUDE: COFFEE BREAKS AND **ALL** SOCIAL EVENTS PROVIDING THAT THE REGISTRANT IS STAYING ON PROPERTY.

CONVENTION FEE: Please click on the one that applies to you:

- JDA MEMBER
 JDA Non-MEMBER
 STUDENT PARTICIPANT
 POST GRADUATES
 DENTAL AUXILIARIES
 DENTAL HYGIENISTS
 DENTAL TECHNICIANS
 NEW DENTIST
 OTHER

	# OF PERSONS	USD AMOUNT	JAD AMOUNT
<input type="checkbox"/> FULL CONVENTION REGISTRATION	_____	_____	_____
<input type="checkbox"/> JDA DUES (where applicable)	_____	_____	_____
<input type="checkbox"/> AUXILIARIES (LIST THE NAMES ON PAGE 2	_____	_____	_____
<input type="checkbox"/> TECHNICIANS (LIST THE NAMES ON PAGE 2	_____	_____	_____
<input type="checkbox"/> HYGIENIST (LIST THE NAMES ON PAGE 2	_____	_____	_____
<input type="checkbox"/> STUDENT/POST GRAD/INTERN	_____	_____	_____
<input type="checkbox"/> NEW DENTISTS	_____	_____	_____
<input type="checkbox"/> GRAND TOTAL	_____	_____	_____

CONVENTION DETAILS:

FOR ACCURATE NUMBERS EACH DAY, PLEASE INDICATE BELOW YOUR ATTENDANCE FOR THE CONVENTION:

WHAT DAYS WILL YOU WILL ATTEND THE CONVENTION? WEDNESDAY THURSDAY FRIDAY SATURDAY

ALL SOCIAL EVENTS ARE COMPLIMENTARY (FOR FULL REGISTRANTS) IF STAYING ON PROPERTY

WHICH EVENINGS WILL YOU WILL ATTEND THE SOCIAL EVENTS? WEDNESDAY - **\$50.00** PER PERSON FRIDAY - **\$75.00** PER PERSON

OF PERSONS STAYING ON-PROPERTY _____ # OF PERSONS STAYING OFF- PROPERTY _____

I WILL ATTEND THE PROGRAM ON SUNDAY 10 FEBRUARY 2019 **Yes** **No** (NO ADDITIONAL CHARGE)

ADDITIONAL COURSES:

TWO HANDS-ON COURSES WILL BE AVAILABLE FOR AN ADDITIONAL FEE OF \$120.00 (DENTAL SURGEONS) AND \$100.00 FOR DENTAL STUDENTS. MORE DETAILS TO FOLLOW.

CREDIT CARD PAYMENTS:

VISA MASTERCARD

CARD NUMBER: _____ EXPIRY DATE: _____

NAME ON CARD (exactly as it appears on the card): _____

HOTEL ACCOMMODATION:

HOTEL RESERVATIONS MUST BE BOOKED THROUGH **GO JAMAICA TRAVEL, CONTACT RESERVATIONS@GOJAMAICATRAVEL.NET**
- SUBJECT "JDA". 38A TRAFALGAR ROAD, SHOP 48, PULSE COMPLEX - 813-333-1464 / 876-920-7051 / 876-920-7052 / 906-3946.

CANCELLATION/REFUND POLICY:

CANCELLATION POLICY: CANCELLATION REQUESTS **MUST** BE MADE IN WRITING AND POSTMARKED BY FEBRUARY 4, 2019 FOR A PARTIAL REFUND OF 80%.

NO REFUNDS WILL BE ISSUED FOR CANCELLATION RECEIVED **AFTER** FEBRUARY 4, 2019. PHONE CANCELLATION WILL **NOT** BE ACCEPTED.

REFUND POLICY: **NO** REFUNDS OR CREDITS WILL BE GIVEN ON SITE. YOU WILL RECEIVE YOUR REFUND WITHIN 30 DAYS POST-CONVENTION.

OTHER DETAILS:

NAME OF DENTIST: _____

PLEASE LIST STAFF MEMBERS NAMES BELOW:

DENTAL ASSISTANT	DENTAL OFFICE STAFF	DENTAL HYGIENIST	DENTAL TECHNICIAN

TOTAL # OF STAFF MEMBERS: _____

TOTAL AMOUNT SUBMITTED: _____