

Registration • Tuition • Accommodations

Name _____

DDS DMD Specialty _____

Address _____

City/State/ZIP _____

Telephone/Fax _____

Email _____

AGD# _____

Check enclosed:

Charge my credit card: Visa MasterCard American Express

\$1500 Deposit: Payment in Full:

Card Number/Exp Date/CVC Code _____

Name on Card _____

Card Billing Address _____

Signature _____

**Mail, email, fax (919-544-9669) or call (919-544-3721)
for easy enrollment:**

Triangle Dental Institute

1622 E. Hwy 54, Durham, NC 27713

email: triangledentalinstitute@gmail.com

Tuition:

November 15, 2018	\$7900 (early registration)
January 15, 2019	\$8400
March 1, 2019	\$8800
Late entries	\$9200
October Team Training Weekend	\$400 per Team Member

The \$1,500 non-refundable deposit will hold your space.

The remainder can be paid in two installments, half by April 12 and half by June 21.

Fees are for cash/check payments. Credit card payments require an additional 2% transaction fee.

Accommodations:



**The Courtyard
Marriott**
301 Residence Inn Blvd.
Durham, NC 27713
(919) 484-2900



**Marriott Research
Triangle Park**
4700 Guardian Drive
Durham, NC 27703
(919) 941-6200
(800) 228-9290
Fax: (919) 941-6229