

15th Annual Alumni Day Program

March 12, 2010

To Enroll: Please complete the registration form and send it with your payment (check or credit card.) Make checks payable to UTHSCSA. Enrollment is not complete without payment.

By Mail: Dental Hygiene Continuing Education
UT Health Science Center Dept. of Dental Hygiene
7703 Floyd Curl Drive
San Antonio, Texas 78229-3900

By Fax: 210-567-8843

Cancellation Policy: Full refund of tuition will be honored if cancellation is provided on or before **one week prior to course.** Partial tuition will be honored for cancellations after **one week prior to course.** No refund of tuition fee will be honored for cancellations on the day of the course.

For information about this program or any other dental hygiene continuing education course please contact Tina Stein, RDH, BS, at 210-567-8841 or e-mail Stein@uthscsa.edu. Visit us on the Web at www.uthscsa.edu/shp/dh/cont-ed.asp.

Please use one form per person (photocopy form as needed)

- Dental Hygienist, UT Health Science Center Alumni: \$125 Year Graduated _____
 Dental Hygienist/Assistant: \$145
 Dentist: \$155
 Luncheon Only: \$30

Name _____

License # _____

(c/o) Dr. _____

Office Address _____ Suite # _____

City, State, Zip _____

Office Phone () _____ Office Fax () _____

Home Address _____

City, State, Zip _____

Home Phone () _____ Email _____

Payment:

Enclosed (Payable to UT Health Science Center): Amount: \$ _____

Visa Master Card Check

Card Number _____

Exp. Date _____ 3 Digit CVV Code _____

Card Holder's Name _____

Card Holder's Signature _____

For Office Use: PD IDT Confirmation Pending Coupon