



LIST ALL REGISTRANTS

Please note: payment information on the first registration form will be used for each subsequent registration.

NOTE: The Primary Mailing Contact name will appear on the registration envelope when the badges are mailed.

NOTE: Attendance Verifications are emailed. If you wish to receive an Attendance Verification, ODA requires an email address for each individual registrant. Please provide this in the appropriate space below.

Please photocopy this page for additional registrations or register online at asm.oda.ca

	Dr/Mr/ Mrs/Ms	Last Name	First Name	Member ID	Registration Category Code	Registration Fee	TICKETED EVENTS AND WORKSHOPS						TOTAL
							Code	Fee	Code	Fee	Code	Fee	
PRIMARY CONTACT							1.		2.		3.		
	Email:						4.		5.		6.		
2.							1.		2.		3.		
	Email:						4.		5.		6.		
3.							1.		2.		3.		
	Email:						4.		5.		6.		
4.							1.		2.		3.		
	Email:						4.		5.		6.		
5.							1.		2.		3.		
	Email:						4.		5.		6.		
												GRAND TOTAL	

CASL (Canada only): Opt in Opt out

(CASL opt in provides the ODA with permission to send email updates on the ASM and if you select opt out, you will not receive further updates.)

MOBILE APP: Opt in out

MAILING INFORMATION If you are registering as a group (two or more people), registration packages, including badges and tickets, will be mailed to the address provided with the Mailing Contact Information.

Office/Dentist's Name _____

Address _____ Unit/Suite _____

City _____ Prov/State _____ PC/ZIP _____ Country _____

Bus. Phone _____ Fax _____ Email _____

PLEASE SEE PAGE #83 FOR TICKETED CODES AND PRICING.

Yes, please use the same credit card information for each registration form.

Payment Method: AMEX MasterCard VISA Cheque # _____ (Made payable to *Ontario Dental Association*)

Name of Card Holder as it appears on card _____

Card Number _____ Expiry Date _____

Signature _____
(No phone registration accepted.)

Register Online at asm.oda.ca

OR fax to: Attn: 2018 ODA Annual Spring Meeting
508-743-9616

OR mail to: 2018 Annual Spring Meeting
c/o Convention Data Services
7 Technology Park Drive
Bourne, MA 02532 USA

Call Centre: 877-779-3127 or 508-743-8505

All fees are in Canadian dollars and include HST. ODA HST No. RT00109095.

METHOD OF PAYMENT MUST ACCOMPANY EACH REGISTRATION FORM OR THE REGISTRATION WILL NOT BE DEEMED COMPLETE.

Please note that the information collected on this form and online will be used by the ODA for the purpose of ASM registration, providing communication updates, disclosure of your contact information to exhibitors when your badge is scanned, and market research and for no other purpose. The ODA is committed to protecting the privacy of your personal information. For more information about the ODA's management of personal information, or the ODA's use and disclosure practices, please contact the Chief Privacy Officer or a Member Service Representative or Helen McDowell at 1-800-387-1393 or 416-922-3900, via email at info@oda.ca or by fax at 416-922-9005.