

REGISTRATION FORM

The Magic of Prevention

November 8, 2019

Name: _____

Address: _____ City _____ Zip Code: _____

If you are interested in receiving information about future continuing education courses, please share your email address. Email Address: _____

ADHA/MDHA Membership Number: _____

\$15.00 (Member fee)

\$40.00 (Non-member fee)

Make Check payable to MDHA (Michigan Dental Hygienists Association)

Submit registration and payment to:

Eve Sidney

Southwest Dental Hygienists' Association

2885 Taft Court

Dowling, MI 49050

Registration Deadline is November 1, 2019.