

Registration Form

Name _____

Address _____

Phone
(Home) _____

(Cell) _____

E-mail _____

ADHA Member # _____

Registration/Mtg fee:

KDHA Member

- \$ 70 received on or before Mar. 15th, 2012
- \$ 80 after March 15th, 2012

Non-Member RDH's/DDS/Dental Staff

- \$ 100 received on or before Mar. 15th, 2012
- \$ 110 after March 15th, 2012

Student

- \$25 received on or before Mar. 15th, 2012
- \$30 after March 15th, 2012

** Lunch Buffet Provided

Total enclosed \$ _____

*Please detach this portion of the brochure
and return it with your check made
payable to:*

Kansas Dental Hygienists' Association

KDHA SPRING MEETING

Saturday, March 31, 2012

**“The Changing Face of Dental
Hygiene Practice:
Expert Clinician, Skilled
Motivator and Preventive
Specialist”**

Best Western & Country Inn Suites
506 N 14th, Dodge City

Registration: 8:00 am
CE: 8:30 am – 4:00 pm
Lunch (provided): 11:30 – 1:00 pm
6 CEU's

Sponsors include: Premier



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www.kdha.org

Kansas Dental Hygienists' Association
639 S Christine
Wichita, KS 67218

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