

**2014 COURSE REGISTRATION FORM**

**Institute for Advanced Dental Education, Ltd.  
www.dentaed.org**

**Refer to the website for course locations.**

**COURSE PRICING:**

**Registration: \$295**

**If purchased 30 days or more before the course date, the signup cost is \$245.**

**Please fax completed form to Lynn Feinstein, IADE, Ltd. Assistant Director:  
Fax # 847-433-7945**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Email** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Cell Phone** \_\_\_\_\_ **Fax** \_\_\_\_\_

**Course Instructor:** \_\_\_\_\_

**Date(s) of Course** \_\_\_\_\_

**LIMITED SPACE AVAILABLE: Cancellation after 2 weeks before the course will result in 10% of fee forfeited.**

**Mail check payable to: IADE, Ltd. 365 Moraine Road, Highland Park, IL 60035**

**Questions: Call Lynn Feinstein at 224-927-9322 or email:  
lfeinstein@aol.com**

**Courses Begin at 8:00 AM - Fee includes Breakfast and Lunch - Fee does NOT include transportation or lodging. Course will conclude at 4:30PM. The closest airport is O'Hare.**