

**FEB 2026 MEETING**

**REGISTRATION FORM  
3 CE HRS**

**AGD CODES 490**

**Registration Deadline: February 6, 2026**

Registration Fee:	<b>Members/Guests \$90</b>	<b>Residents/D4 Students \$30</b>	<b>Non-Members \$180</b>
On-site Fee:	<b>Members/Guests \$120</b>	<b>Residents/D4 Students \$60</b>	<b>Non-Members \$210</b>

**Name:** \_\_\_\_\_ **Title (Please Circle):** **DDS DMD RDH RDA**

**Address:** \_\_\_\_\_ **City, State, Zip:** \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

**Day Time Phone: (\_\_\_\_) \_\_\_\_\_**

Please RSVP by mailing your registration form and check to the Houston Asian American Dental Society, c/o Shelly Ching, PO Box 941082, Houston, TX 77094.

For any inquiries or additional information, please contact Shelly at [shellylching@gmail.com](mailto:shellylching@gmail.com).

If you are unable to attend the meeting, please kindly let us know ahead of time. Thank you for your cooperation and assistance.