

OCT 2026 MEETING

REGISTRATION FORM  
2 CE HRS

AGD CODES 310

Registration Deadline: October 10, 2026

|                   |                     |                            |                   |
|-------------------|---------------------|----------------------------|-------------------|
| Registration Fee: | Members/Guests \$60 | Residents/D4 Students \$30 | Non-Members \$120 |
| On-site Fee:      | Members/Guests \$90 | Residents/D4 Students \$60 | Non-Members \$150 |

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.