



MEDIA TRAINING CRASH COURSE

Wednesday, Oct. 31 | Baltimore
during the ACP Annual Session

ATTENDEE INFORMATION

First Name

M.I.

Last Name

Email (Required - Confirmations will be sent via email)

TIME SLOT

REGISTRATION FEES

3:00 - 4:30 p.m.

Members: \$25

** Must be registered for Annual Session to enroll in course.

METHOD OF PAYMENT

Check (Make payable to American College of Prosthodontists)

VISA MasterCard American Express

Card Number

Exp. Date

Cardholder Name

Mail or Fax your completed form to:
American College of Prosthodontists
211 E. Chicago Avenue, Suite 1000, Chicago, IL 60611
Phone: 312.573.1260 | Fax: 312.573.1257
Email: esummers@prosthodontics.org