

2019 MPL Association Dental Workshop Registration Form

To register, complete all information requested below. For multiple registrations, you may photocopy this form.
A separate form must be completed for each workshop registrant.

Full Name _____

First Name for Badge _____

Company _____

Professional Designation (i.e. MD, JD, CPA, etc.) _____ Title _____

My relationship with the member company listed above is the following: Employee Board Member Consultant Other
*Registration for the Workshop is restricted to Board members and employees of MPL Association member companies and their subsidiaries.

Business Address _____

City, State, Zip _____

Country _____ Telephone _____

E-mail Address _____

Additional e-mail address for registration confirmation _____

Note: Confirmation will be provided by e-mail within three business days of receipt of registration.

Registration Fee (please check one)	Regular or Industry Associate	Affiliate Partner Premium	Affiliate Partner Advantage/ Defense Law Firm
Discounted Rate (postmarked or submitted by 3/1/19 with payment included)	<input type="checkbox"/> \$895	<input type="checkbox"/> \$895	<input type="checkbox"/> \$1,095
Regular Rate (postmarked or submitted after 3/1/19 with payment included)	<input type="checkbox"/> \$995	<input type="checkbox"/> \$995	<input type="checkbox"/> \$1,195

Registrants who register after March 1, 2019 may not appear on the attendee list.

Vegetarian Food Allergies _____

Emergency Contact _____ Telephone _____

Check this box if you wish to have your phone/e-mail withheld from the workshop attendee list.

Payment Information

Total Amount Due: \$ _____

Check (make payable to MPL Association, and reference the 2019 Dental Workshop)

Visa MasterCard American Express

Name on Card _____

Credit Card Number _____

Expiration Date _____

Signature _____

Cancellation Policy

All requests for refunds must be made in writing and sent via e-mail or mail to the MPL Association. Requests made on or before Friday, March 1, 2019, will receive a refund minus a \$100 administrative fee. Due to contractual commitments, cancellations received after Friday, March 1, 2019, including all no-shows, will not be eligible for a refund. However, substitutions are permitted with notice.

Please note that in cooperation with the hotel and the discount afforded to the workshop registrants, the Association will confirm all registrations in its hotel room block.

Hotel Reservations:

Kimpton Epic Miami
270 Biscayne Blvd. Way
Miami, Florida 33131
305.424.5226

The MPL Association discounted rate is \$269 per night (plus a 13% state and local tax per room.) To make reservations, please call the hotel by Friday, March 1, 2019, and reference the MPL Association Workshop.

Americans with Disabilities Act (ADA)

If you have any special needs as identified in the ADA that require specific aids or services, please notify MPL Association via e-mail at Meetings@MPLAssociation.org. prior to the Workshop.

**Three Easy Ways
to Register:**

1. Online
www.MPLAssociation.org

2. E-mail
Meetings@MPLAssociation.org

3. Mail
MPL Association Attn: Meetings Dept.
2275 Research Blvd., Suite 250
Rockville, MD 20850