

Nevada Dental Association's Annual Midwinter Meeting
February 11-12, 2011
Silverado Resort Napa, CA

Event	Time	# Attending	Fee	Total Payment
Registration - NDA Member		_____	\$0	
Registration - NDA Spouse/Child		_____	\$0	
Registration - Non-member (required)		_____	\$100	_____
Friday				
Golf	10am-3pm	_____	\$70	_____
President's Reception	6:30-8:30pm	_____	\$60	_____
Saturday				
Breakfast	8am	_____	\$25	_____
House of Delegates	9am-12noon	_____		_____
Dinner at Markham Winery	6-9pm	_____	\$100	_____
Grand Total				_____

**Registrations will be accepted until January 28, 2011. Registrations after this date will be onsite only.
NO REFUNDS WILL BE GIVEN PAST January 28, 2011**

Name: _____
 Guest(s): _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Fax: _____

Accepted forms of payment are: check payable to NDA, credit cards (Visa, MasterCard and AMEX) or website at www.nvda.org

Credit Card Number: _____
 Expiration Date: _____ Security Code: _____
 Name on Card: _____
 Billing Address: _____

 Authorized Signature: _____
 Email : _____

Mail or Fax completed form to:

Nevada Dental Association
 8863 W. Flamingo Rd., Ste. 102
 Las Vegas, NV 89147
 702-255-4211
 Fax: 702-255-3302

Registration Information

Hotel Reservations
 Silverado Resort
 800-532-0500
 Group - Nevada Dental Association
 \$160/night
***Deadline January 17, 2011**