

THE 4TH INTERNATIONAL CONGRESS ON 3-D DENTAL IMAGING

REGISTRATION FORM

June 25-26, 2010

The 4th International Congress on 3-D Dental Imaging

Hotel Accommodations

Estancia La Jolla Hotel & Spa
9700 N. Torrey Pines Road
La Jolla, California 92037
1- 877- 437- 8262
<http://www.estancialajolla.com/>

A limited number of hotel rooms are available on June 24, 25, and 26. Please call the Estancia La Jolla Hotel & Spa directly at (877) 437-8262 and be sure to mention you are with "The 4th International Congress" in order to receive the discounted hotel rate of \$175.

Rooms are on a first-come, first-served basis and are subject to availability.

Make your reservation by June 4, 2010 to receive the special rate.

June 24, 2010

Customer Users' Meeting

We are having an i-CAT® and GXCB-500™ Customer Users' Meeting to provide a forum to learn about updates and information on our 3-D imaging products as well as advanced training on the tools, techniques and functions in the i-CATVision™ software for optimal navigation of the 3-D volume data for diagnosis and treatment planning.

QUESTIONS?

Please contact Nicole Serago at 1-267-954-0227 or e-mail at nicole.serago@imagingciences.com.

(Please print your name clearly. All information is required.)

First Name _____

Last Name _____

Specialty _____

Mailing Address _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

E-Mail Address _____

(We frequently send confirmations and important updates via e-mail.)

Phone _____ Fax _____

Do you currently utilize cone beam technology? yes no (If so, which model? _____)

Are you considering purchasing cone beam 3-D technology?

Within 3 months Within 6 months Within 12 months No

I WILL ATTEND: (check one)

- Users' Meeting only - June 24, 2010
 Congress only - June 25-26, 2010
 Users' Meeting and Congress - June 24-26, 2010

PROMO CODE: _____

PAYMENT INFORMATION

To process your registration, your credit card number or check made payable to "Imaging Sciences International" must accompany your registration. Registration without full payment will not be processed.

METHOD OF PAYMENT

- Check enclosed (payable to "Imaging Sciences International")
 AMEX Visa MasterCard

Credit Card Number _____

Security Code _____

Expiration Date _____

Cardholder's Name (as it appears on card) _____

Cardholder's Signature _____

REGISTRATION PRICING

- Congress Registration: \$700

- Users' Meeting Registration: \$130

- Users' Meeting & Congress Bundle
Registration: \$700

REGISTRATION FEE CANCELLATION/REFUND POLICY

All cancellations must be submitted in writing one full week prior to scheduled event to receive a 50% refund of the Registration Fee. Cancellations received less than one full week prior to scheduled seminar are non-refundable, but transferrable to another member of the same practice. All refund requests will be processed post-event.

Yes, I agree with Imaging Sciences International's Registration Fee Cancellation/Refund Policy.

