

An AAID Maxicourse®

**A COMPREHENSIVE TRAINING PROGRAM ON ORAL  
REHABILITATION AND IMPLANT DENTISTRY**

**Registration Form for PR AAID Maxicourse® 3**

NAME: \_\_\_\_\_ Degree: \_\_\_\_\_

License No: \_\_\_\_\_

State: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Numbers: Office \_\_\_\_\_

Cellular \_\_\_\_\_

Home \_\_\_\_\_

Total cost of tuition: **\$19,950.00**

**\* Total payments have a 5% discount**

Deposit: **\$2000.00** (non refundable)

Payment:

\_\_\_ Check or Money Orders:      Number: \_\_\_\_\_      Date: \_\_\_\_\_

\_\_\_ Credit Card:                      \_\_\_ VISA                      \_\_\_ Master Card

Name: \_\_\_\_\_

Number: \_\_\_\_\_      Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_      Date: \_\_\_\_\_

*For official use only:*

I, \_\_\_\_\_, working as \_\_\_\_\_ for  
\_\_\_\_\_ received \$ \_\_\_\_\_ from  
\_\_\_\_\_ as a deposit for the **PR AAID Maxicourse3®**, to be  
offered in Puerto Rico since September 15, 2011 up to June 9, 2012.

Signature: \_\_\_\_\_      Date: \_\_\_\_\_

**Sponsored by:** *The Advanced Dental Implant Institute and Tatum Institute International,*