

# SIGN ME UP

FOR THE McHENRY, IL 12-SESSION COURSE (2016-2018)

Name \_\_\_\_\_ D.D.S./D.M.D.

E-mail \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Cell ( \_\_\_\_\_ ) \_\_\_\_\_

Fax ( \_\_\_\_\_ ) \_\_\_\_\_

**EARLY BIRD \$500 DISCOUNT** *(check only if applies)*

Yes, I'd like a **\$500 discount** and I agree to **enroll in the full course** prior to the Get Acquainted intro.

## Check all that apply

- Sign me up for the "Introductory Orthodontic Session" for \$150.00. **This session is FREE if you enroll in the full course!**
- Enroll me in the 12-Session Hands-on Course for \$14,400.00\* plus two years of AGpO membership for \$590.00\*.
- I am interested in learning more about the following topics: \_\_\_\_\_

## Payment *(Payments will not be processed until 1 month before the course starts)*

- I have enclosed my check for \$ \_\_\_\_\_ .
- Please place my payment of \$ \_\_\_\_\_ on my credit card # \_\_\_\_\_
  - VISA    MasterCard    Discover    American Express   Exp. Date \_\_\_\_\_ Security Code \_\_\_\_\_
  - Name as it appears on card \_\_\_\_\_
  - Signature \_\_\_\_\_
  - Card billing address *(if different from above)* \_\_\_\_\_

- 12 Months No Interest Financing through the Academy

## How did you hear about us?

- AGpO website
- AGpO member \_\_\_\_\_
- ad *(publication)* \_\_\_\_\_
- other \_\_\_\_\_

## CANCELLATION POLICY *(check to accept terms)*

I understand that once my tuition is paid, I have three business days to cancel the course without penalty. No refunds will be made less than 21 days prior to the first session. The Academy reserves the right to delay or cancel this course with my option of a full refund.

MCHEN1618

Academy of Gp Orthodontics | 509 E. Boydston Ave. | Rockwall, TX 75087 | Phone 800.634.2027 | Fax 888.634.2028

**Register today! Mail, Fax (888) 634-2028 or go to [www.academygportho.com](http://www.academygportho.com)**



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03/01/2014 to 02/28/2017