



CREDIT CARD AUTHORIZATION

Thank you for your interest in our Study Club. Register now while seats are available!

“Current Prosthodontic Challenges”

September 27th, 2019

The 1818 Club. 6500 Sugarloaf Pkwy, 3rd floor. Duluth, GA 30097

Time: 8 am - 1 pm

CE: 4 units

Attendance fee \$30.00 per person

Number of attendees: _____ x \$30.00 Total: \$_____

Credit card: Visa ___ Master Card ___ American Express ___ Discover ___

Type: Corporate ___ Personal ___ Debit ___

Name (As it appears on card) _____

Billing address: _____

Card Number: _____

Expiration Date: _____ Security Code: _____

Cardholder's Signature: _____

Today's date: _____

Email form to info@ImplantOption.com