



The Annual Ralph F. Sommer Endodontic Symposium 2022

ENDO RULES 360° Registration

Personal Information Primary Registrant

First Name: _____

Last Name: _____

Email: _____

Phone: _____

Symposium Fee: \$495.00

Friday, June 10 (7) CE Hrs
— Edsel and Eleanor Ford House
— Grosse Pointe Yacht Club Destination Celebration

Business Information

Company: _____

Address: _____

City: _____

State: _____

ZIP Code: _____

Badge Information

Badge Name: _____

Dental Specialty/ Industry Role/ Title (optional):

Practice/Business Name (optional):

Optional Selections

RSVP for Friday Evening Destination Celebration at the
Grosse Pointe Yacht Club (no additional cost for primary
registrant) Yes Not attending

ONE Additional Friday evening guest @\$95
 Name: _____ \$95

Saturday Extension Session — Detroit Marriott/RenCen
Doctors must attend Friday to be eligible for Saturday @\$95
ONE Auxiliary/Supporting Staff Participant @\$95

Yes, Primary Registrant is attending \$95

No, Primary Registrant is not attending

ONE Staff attending with primary registrant \$95

Staff Name: _____

TOTAL ADDITIONAL COSTS: (ADD TO \$495 Symposium)

Payment

Send this form with your registration information and credit card information or a check payable to **Ralph F. Sommer Endodontic Symposium**

MAIL:
Ralph F Sommer Symposium Registration
c/o Dr. George Goodis, Symposium Chair
20175 Mack Ave
Grosse Pointe Woods, MI 48236

FAX: 313-886-4881
email: rfsommer@endodoctors.com

Credit Card: _____

Card Type: MasterCard VISA

American Express

Card Number: _____

Exp. Date: _____ CCV: _____

Billing Zip Code: _____

Signature: _____