

REGISTRATION FORM – P.A.O. 53rd ANNUAL MEETING

Date: Friday and Saturday, June 21st & 22nd, 2019

Location Liberty Mountain Resort

78 Country Club Trail, Carroll Valley, PA 17320

(T) 717-642-8282

(Tell Liberty Mountain Resort that you are part of the PA. Orthodontists group)

REGISTER ONLINE AT: www.PAOrthodontists.org

FAX TO P.A.O.: 215-234-9936 OR MAIL TO: P.A.O., PO Box 96, Green Lane, PA 18054-0096

DOCTOR'S NAME: _____ SPOUSE:

_____ STAFF OR GUEST:

STAFF OR GUEST:

STAFF OR GUEST:

STAFF OR GUEST:

ADDRESS:

CITY: _____ STATE: ___ ZIP:

OFFICE PHONE: _____ FAX:

EMAIL: _____

REGISTRATION: (CIRCLE ONE)

BEFORE JUNE 8

AFTER JUNE 8

PAO MEMBER.....	\$450.00.....	\$525.00
F/T FACULTY.....	\$275.00.....	\$350.00
RETIRED PAO.....	\$150.00.....	\$225.00
ORTHO RESIDENT.....	\$150.00.....	\$225.00
NON AAO MEMBER.....	\$595.00.....	\$695.00
SPOUSE/GUEST.....	\$99.00.....	\$125.00
STAFF 1 day	\$99.00.....	\$125.00

STAFF 2 days.....\$175.00.....\$225.00

P.A.O. Social Event – Everyone is Invited! Friday 6:00

Members, residents, spouses, families, staff and friends are welcome!

Make some new and visit with some old friends! A Casual and Fun Event!

ADULT \$75.00 x _____ = _____

CHILD (15 or under) \$25.00 x _____ = _____

TOTAL REGISTRATION FEE: \$_____ (Registration and Party tickets)

CHECKS: PAYABLE TO: PENNSYLVANIA ASSOCIATION OF ORTHODONTISTS

CREDIT CARDS: PAYMENT THROUGH PAYPAL:

GO TO: www.PayPal.com and send funds to: PAOrthodontists@comcast.net

I AM INTERESTED IN GOLFING: We need an email address (enter above) to put golfers in touch!

FRIDAY AFTERNOON? _____ SATURDAY AFTERNOON?

Note: Golf Fees charged to individual registrants