



Registration Form

Advanced Implant Dentistry Course

**Venue: P-I Brånemark Institute, Block C,
Rochesterplace, 173 Rivonia Rd, Sandton**

I want to register for one of the following:	Dates	Cost	Course Code
Advanced Implant Dentistry	<input type="checkbox"/> 15 - 17 November 2019	Dentist: ZAR 14 500 <input type="checkbox"/> Dental Technician: ZAR 2 700 <input type="checkbox"/> Registrar: ZAR 3 000 <input type="checkbox"/>	AID
Introduction to Comprehensive Implant Dentistry	<input type="checkbox"/> TBA	Dentist: ZAR 10 500 <input type="checkbox"/> Dental Technician: ZAR 2 000 <input type="checkbox"/> Registrar: ZAR 2 500 <input type="checkbox"/>	ICID

Placement of implants: Internal External Restoration

Training Provider: PIBISA Course Manager: Michelle Peo Tel: +27 (0)12 667 1046 E-mail: michelle.p@southernimplants.com

Title: Prof. Dr. Mr. Mrs. Ms.

Surname: First Name:

ID Number: HPCSA Number:

Company Order Number: Field of Practice:

VAT Number: *IF APPLICABLE*

Organisation:

Postal Address:

City: Postal Code:

Telephone: Mobile:

Facsimile: E-mail:

Dietary requirements: None Halaal Kosher Vegetarian

Please note: Special dietary requirements such as Halaal and Kosher catering can be provided for.
A sur-charge on these food items of R100 per day will be for the delegates own account.

Payment Procedure

- On receipt of your payment and registration form, a confirmation e-mail will be sent.
- Please e-mail your deposit receipt or internet transfer proof to accounts@edoc.co.za.
(Your surname as reference)

Deposit Direct: Standard Bank (Business Account)
 Account Name: SOUTHERN IMPLANTS
 Account No: 310651247
 Branch Code: 010945
 IBAN: ZA010945
 Bank Swift Code: SBZAJJ
 Note: No refunds will be awarded if delegates cancel within 7 working days
 Substitutions of delegates will not be allowed.

What some of our delegates say:

- "Fantastic course" • "Well thought of topics. Informative." • "Love the enthusiasm of the PIBISA team."
- "Job well done!" • "Definitely recommended. Very insightful."

2 easy ways to register for these courses:



E-mail registration form to:
michelle.p@southernimplants.com



Contact Michelle on:
+27 (0)12 667 1046