

# Registration Form for 2022 Class

## **The Puerto Rico MaxiCourse® Program and Clinical Residency in Implant Dentistry**

NAME: \_\_\_\_\_ Degree: \_\_\_\_\_

License No: \_\_\_\_\_ AGD # \_\_\_\_\_  
State: \_\_\_\_\_ AAID # \_\_\_\_\_

Mailing Address:  
\_\_\_\_\_

Phone Numbers: Office \_\_\_\_\_ email: \_\_\_\_\_  
Cellular \_\_\_\_\_  
Home \_\_\_\_\_

Total cost of tuition: **\$24,950.00** \* **Payments in Full have a 7% discount** (does not apply to payments with a credit card)

\_\_\_\_\_ Deposit: **\$2,000** (non-refundable)

Payment:

\_\_\_ Check or Money Orders:

Number: \_\_\_\_\_ Date: \_\_\_\_\_

Credit Card: \_\_\_ VISA \_\_\_ Master Card

Name: \_\_\_\_\_

Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Security Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*For official use only:*

I, \_\_\_\_\_, working as \_\_\_\_\_ for  
\_\_\_\_\_ received \$ \_\_\_\_\_ from  
\_\_\_\_\_ as a deposit for the **PR MaxiCourse®**, to be offered in Puerto Rico since  
April 4 2022 up to December 10 2022.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Sponsored by:** *The Advanced Dental Implant Institute  
University of Puerto Rico- Deanship of Academic Affairs  
American Academy of Implant Dentistry*