

GENERAL MEMBERSHIP MEETING REGISTRATION FORM

Thursday, May 1, 2025

DSDS Business Meeting - 6:00 p.m.-7:00 p.m. President's Reception - 7:00 p.m.-10:00 p.m.

Honoring President Daniel E. Matthews, DMD

Bellmoor Inn - Rehoboth Beach

Please make your reservations by Friday, April 25.

Payment required for reservation to be confirmed.

Please complete the information below to register. Payments may be made by credit card or check. Online registration is restricted to credit card payments only. In order to pay for your registration by check, make checks payable to DSDS and mail to the address below. Print and complete this registration form and return it by email or mail. Important - For all mail-in registrations, please also email DSDSTOM@comcast.net notice in order to be placed on the May 1, 2025 attendance list.

Mail form to:

Email form to:

DSDSTOM@comcast.net DSDS - 892 Eichele Road, Perkiomenville, PA 18074 NAME TITLE MEMBERSHIP TYPE EMPLOYER'S NAME (staff registrant's only) OFFICE ADDRESS CITY STATE OFFICE PHONE **EMERGENCY PHONE** EMAIL (Registration confirmation will be sent via email approximately one week prior to the course.) **REGISTRATION FEE:** ____I will attend the PRESIDENT'S RECEPTION \$65/person I will attend the DSDS BUSINESS MEETING (ONLY) No charge to ADA/DSDS Members for the Business Meeting. **REGISTRATION PAYMENT:** CHECK ENCLOSED \$ CREDIT CARD NO.

SECURITY CODE

EXPIRATION DATE

Other Attendees:

Name:		
Membe	ership:	
	I will attend PRESIDENT'S RECEPTION - \$65/person.	
	I will attend the DSDS Business Meeting ONLY - No charge to ADA/DSDS Members for Business Meeting.	the
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