



COMPLETE THIS FORM AND EMAIL TO [INFO@PENICHETEAM.COM](mailto:INFO@PENICHETEAM.COM) OR FAX TO (503) 666-4937

**LOCATION:** PORTLAND, OR

**DATES:**  FEBRUARY 22 & 23, 2024     JUNE 13 & 14, 2024

**COURSE HOURS:** THURSDAY 8:30 AM - 4:00 PM • FRIDAY 8:30 AM - 12:00 PM

**COURSE FEE:** \$1,480

**INCLUDED:** 3 months of post-course support. Each course includes a continental breakfast, catered lunch, and an afternoon reception on day one.

NAME:	DATE:
PRACTICE NAME:	DOCTOR'S NAME:
IS THIS AN ORTHODONTIC PRACTICE? YES/NO	IF NO, WHAT IS THE PRACTICE SPECIALTY?
ADDRESS:	CITY: STATE: ZIP:
CELL PHONE:	OFFICE PHONE:
ATTENDEE EMAIL:	WEBSITE:
DOCTOR'S EMAIL:	AVERAGE MONTHLY EXAMS:
AGE OF THE PRACTICE:	AVERAGE MONTHLY NEW PATIENT CALLS:
NUMBER OF DOCTORS:	NUMBER OF OFFICES/SATELLITES:
OFFICE SOFTWARE:	
HOW MANY YEARS HAVE YOU BEEN WITH THE PRACTICE?	
IS YOUR OFFICE PART OF A DENTAL SERVICE ORGANIZATION? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, DSO:
HAVE YOU ATTENDED ANY OF OUR COURSES OR LECTURES? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, COURSES:
HAVE YOU EVER WORKED WITH A CONSULTING FIRM? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, FIRM:
ARE YOU A FULL TIME MARKETING COORDINATOR? ( YES - NO ) WHAT ARE THE GOALS FOR YOUR PRACTICE?	

**Tuition Policy:** The tuition is nonrefundable 30 days prior to the Master Marketing Academy. However, 50% of the tuition may be transferred once to a future Master Marketing Academy.

**Please check one:**  Master Card     Visa     American Express

**Card#:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_ **CVC:** \_\_\_\_\_

**Printed Name of Cardholder:** \_\_\_\_\_

**Cardholder Signature:** \_\_\_\_\_

\*By signing, you acknowledge that you have read, understand and agree with the cancellation policy above.

**Are you a Mari's List member?**  Yes  No

**Are you an Elite Dental Alliance member?**  Yes  No If Yes, Member ID# \_\_\_\_\_

**Whom may we thank for referring you to our Workshop?**  Mailer  Internet  Other (please specify) \_\_\_\_\_

Your confirmation packet will be sent to you via email and will include instructions to assist in booking your hotel reservations. Please confirm registration prior to booking your travel arrangements.

Please check here if you do not want to receive future emails on upcoming courses and events.