

REGISTRATION FOR THE HDHA 35TH ANNUAL SCIENTIFIC SESSION

Sunday, November 8, 2026

Name _____

Employer Name _____

Address _____ Cell Phone _____

City _____ State _____ Zip _____ ADHA # _____

Email _____

Please print clearly. Continental Breakfast, Lunch, and Afternoon Snacks Provided. Self-Parking: \$8 with validation.

**Disclaimer: Please opt out if you would not like registration information shared with speakers and vendors.

____ Do not share my information

REGISTRATION FEES & DEADLINES	HDHA MEMBER FEES	NON-MEMBER/DENTIST FEES
Pay <u>Before</u> October 8	\$225 (*Square add \$9)	\$450 (*Square add \$18)
Pay <u>After</u> October 8	\$275 (*Square add \$11)	\$490 (*Square add \$20)
HDHA Student/BOT Members	\$130 (*Square add \$5)	N/A

AMOUNT ENCLOSED: \$ _____

*QR Code/Square payment available for an additional fee (seen above):

<https://square.link/u/KFvdXwX2>

**Check payment has no additional charge



Make checks payable to: **Hawaii Dental Hygienists' Association.**

Mail completed registration form and check to:

Hawaii Dental Hygienists' Association

P.O. Box 23313 Honolulu, HI 96823

If paying via Square, please mail a registration form with the Square payment date noted on the form.

*For day-of registration, please bring in a hard copy of this form or fill it out once you arrive and pay via check or Square.



Approved provider through December 31, 2024

Absolutely No Refunds or changes after November 1, 2026

*ADHA/HDHA MEMBERSHIP FEE IS \$322 (add \$10 if you are a member of the Maui or West Hawaii Component). Current members save money on the registration fee. Become a member first and take advantage of member pricing throughout the year. Membership questions? Please contact Membership Chair, Anne Hvizdak at hvizdak11@gmail.com.