HIPAA Security Compliance Course

March 31, 2017

Queens County Dental Society, 86-90 188th St., Jamaica, NY

9:00 a.m. – 12:00 p.m.

1. **DENTIST INFORMATION (Please print):**

ADA#:

Name:

Address:

City: State: Zip:

Phone:

Email:

***Please register the following auxiliary staff member (Limit 1):***

**Registration Deadline: March 17**

1. **TUITION: THERE WILL BE NO ON-SITE REGISTRATION**

**󠆖** NYSDA Member Dentist $175

**󠆖** Member’s Auxiliary Staff (Limit 1) $45

**󠆖** Non-Member Dentist $275

**󠆖** Non-Member’s Auxiliary Staff (Limit 1) $75

**TOTAL (Refund Deadline: March 17) $ \_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **PAYMENT:**

**CHECKS:** Please make payable to NYSDA.

**CREDIT CARD:** \_\_\_\_\_Visa \_\_\_\_\_Master Card \_\_\_\_\_AMEX

Card Number:

Exp. Date: CVC:

Billing Address (if different from above): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* Registration confirmations are emailed
* All requests for refunds or credits must be made in writing or by phone and received at least ten business days prior to the course date. A full refund, less a ten dollar ($10) administrative charge, will be issued. Refunds or credits requested after this date will not be granted, including requests made based on absence due to illness, late arrival for courses and/or weather conditions. In the event that a course is cancelled by NYSDA, paid tuition will be fully refunded.
* Continuing education credit can and will only be issued to registrants who attend the entire presentation and submit attendance verification to the chairperson at the conclusion of the program. Registrants MUST check-in prior to the start of the course for credit to be issued. A record of your attendance is maintained by the NYSDA Continuing Education Registry. Evidence of your attendance for other organizations can also be provided upon request.

If you have special needs in order to fully participate, please describe:



**COMPLETE AND RETURN TO:** NSYDA, 20 Corporate Woods Blvd., # 602, Albany, NY 12211 (Attn: Jacquie)

Fax: 518-465-3219 (Attn: Jacquie), Email: [jdonnelly@nysdental.org](mailto:jdonnelly@nysdental.org), or Phone: 800-255-2100