

NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____

ZIP: _____

COUNTRY: _____

PHONE: _____

EMAIL: _____

SPOUSE/
GUEST: _____
(if applicable)

Registration Fees (full meeting, all-inclusive)

AAHD Fellows: \$495
Non-Member: \$595
Spouse/Student: \$295
Late Registration: \$595

Additional Guest Tickets for Individual Events

Annual Banquet: \$100

Late registration fees apply after September 3rd 2015.

Total: \$ _____

Visa & Mastercard Accepted

Card Number: _____

Expiration Date: _____

Signature: X _____

**Presentations to be held at the
Francis A. Countway Library of Medicine**

Thursday, October 8th
Focus Group (*space is limited, RSVP promptly*)
Symposium & Discussion

Friday, October 9th
Registration & Continental Breakfast
Presentations:
Digital Archivism & Stewardship
Progress at the Sindecuse Museum
Moses Hamon: 16th Century Court Physician
Tufts Medical Center Floating Hospital

Saturday, October 10th
Continental Breakfast
Presentation: The History of the Book
Museum Tour: The Ayer Mansion
Annual Banquet at the Saint Botolph Club

Accommodations Available at
THE INN at LONGWOOD MEDICAL

\$199 per night

To book by phone, call 1-800-468-2378
(mention "AAHD Annual Meeting")

To book your room online, visit:
<https://goo.gl/GQpf1O>

**for more information,
visit our website**

www.historyofdentistry.org
or call (617) 731-6767

Please complete this registration form
and mail or fax it with payment to:

AAHD
284 Harvard Street
Brookline, MA 02446 USA

Fax: (617) 731-8724

Checks (mailed forms only)
should be made payable to the AAHD.