

SUBSCRIPTION FORM

The undersigned

hereby requests to be registered for the year 2016 at the Italian Academy of Conservative Dentistry.

To this end, he/she states the following: Qualification: Prof Dr Mr Ms

Full name.....

Place of birth..... Date of birth..... / /

No. of registration at the Dentists National Board.....

Data for invoice emission:

Company Name.....

Street Address.....

ZIP CODE. City. Prov State.....

PASSPORT/ID NUMBER.....

VAT number (mandatory, if present)

Identification number issued by the competent tax authorities (for subjects from abroad) **

.....

Phone. Fax

Email @

**** For specific fiscal needs, foreign persons will be asked to complete an identification form in which, among other things, it will be needed to specify whether the person participates as PRIVATE or TRADER (professional, entrepreneur, etc.); the form shall be forwarded via e-mail to the AIC Secretariat .**

Guarantee of confidentiality. Having read the information (TU 196/2003) contained in the website www.accademiaitalianadiconservativa.it I authorize the sending of advertising material concerning other courses or seminars organized by you: YES NO

I have acknowledged the Constitution and By-laws of the Italian Academy of Conservative published on the website www.accademiaitalianadiconservativa.it

The ORDINARY MEMBERS, the JUNIOR ORDINARY MEMBERS, the JUNIOR AFFILIATE MEMBERS in good standing with the membership fee for the year 2016 are entitled to:

- free participation for 2016 Events
- Online access to the journals from the website of the Academy;
- free access for on line conference
- If registered before December 31, 2015, to indicate the name of a Dental Hygienist who may attend free of charge to the course reserved for them in Riva del Garda May 7th
- If registered before December 31, 2015, to indicate the name of a Technician who may attend free of charge to the course reserved for them in Riva del Garda May 7th
- Discounted rates for journals subscription and purchase of books (the list can be viewed and downloaded from the website: www.accademiaitalianadiconservativa.it)

STUDENTS MEMBERS (enrolled in a Degree Course in Dentistry - enrolled in a Master of Science Course in a School of Dentistry) in good standing with the AIC membership fee for the year 2016 are entitled to:

- free participation for 2016 Events
- Online access to the journals from the website of the Academy;
- free access for on line conference
- Discounted rates for journals subscription and purchase of books (the list can be viewed and downloaded from the website: www.accademiaitalianadiconservativa.it)

I wish to subscribe to the Italian Academy of Conservative Dentistry for the year 2016 as:

ORDINARY MEMBER € 300 =

Graduates in possession of a degree recognized by law for the exercise of the dental profession

JUNIOR ORDINARY MEMBER € 200 =

Graduates in Dentistry under the age of 31 years

STUDENT MEMBER * € 90 =

Enrolled in a Degree Course in Dentistry - enrolled in a Master of Science Course in a School of Dentistry

* please attach a photocopy of a document certifying your status

JUNIOR AFFILIATE MEMBER € 200 =

(up to 30 years of age)

JUNIOR AFFILIATE MEMBER € 300 =

(from 31 to 35 years of age)

Dentists under 35 years of interested in undertaking on the process to become AIC Active Members, who have not yet submitted the protocol of application .

ALL UNITS ARE OFF-VAT

PAYMENT METHOD:

by bank transfer (report in the causal surname and name - share in 2015) made in favor of Accademia Italiana di Conservativa at Banca Popolare di Sondrio, Brescia Branch,

IBAN: IT 25Y056 9611 2000 0001 2848 X41 of € _____

I authorize AIC to publish on the website www.accademiaitalianadiconservativa.it my full name and city in the list of members AIC 2015 YES NO (excluding student members)

Date Signature

INSTRUCTIONS

This application form will be considered valid only if completed in all its parts. Please typewrite or complete in block capitals and send to:

Accademia Italiana di ConservativaAIC

Mailing Address: Viale dei Mille, 9-50131 Firenze - Fax 055 5059360

E-mail: aic@mjeventi.com

Photocopy of this form will be accepted only if compiled as indicated above.