



**24<sup>TH</sup> ANNUAL**

# LONGHORN FOOTBALL DENTAL STUDY CLUB

**AUSTIN, TEXAS**

## BECOME A SEASON SUBSCRIBER

Earn CE's listening to prominent speakers on the UT campus

3 hour courses before the home games

*Feel the Excitement!*

Tailgate meals before the game

Attend home UT football games

Complementary seatback

## TEXAS LONGHORNS 2018 HOME SCHEDULE

SEPTEMBER 8  
UT vs. Tulsa

SEPTEMBER 22  
UT vs. TCU

NOVEMBER 3  
UT vs. West Virginia

SEPTEMBER 15  
UT vs. USC

OCTOBER 13  
UT vs. Baylor

NOVEMBER 17  
UT vs. Iowa State

Course topics will be announced soon. Courses are held at the Thompson Conference Center next to the LBJ Library, right across the street from Royal Memorial Stadium.

### TICKET AND PARKING PASS POLICY

Because of the high demand of football tickets, a policy has been established for ordering extra game tickets on a limited basis. All ticket orders are handled on a first-come, first-served basis. Parking passes are limited, we have only enough to provide 1 per family. If more become available, you will be contacted.

### PRIORITY TICKETS, PRIORITY SEATING, AND PRIORITY PARKING WILL BE GIVEN TO SEASON SUBSCRIBERS

- Season Subscribers who order the same number of extra ticket(s) for each game will be given priority.
- The Season Subscriber who orders extra ticket(s), but not the same number of tickets for each game, will not be guaranteed that the guest(s) will be seated together.
- Those who register on an individual basis for the series and ordering extra ticket(s), will not be guaranteed that the guest(s) will be seated next to the individual.

# LONGHORN FOOTBALL DENTAL STUDY CLUB REGISTRATION FORM

## LONGHORN FOOTBALL DENTAL STUDY CLUB

Please reserve a spot for the entire series. Please find enclosed \$2,275.00

I wish to purchase \_\_\_\_\_ additional season tickets at \$460.00 each

I wish to purchase \_\_\_\_\_ additional series meals at \$75.00 each  
\_\_\_\_\_ or \_\_\_\_\_

**SEASON UNDERWRITER A:** Send a nonrefundable deposit of \$500.00, by June 1, 2018 to receive a 15% fee reduction.

- \$2,275.00 - \$341.00 - \$500.00 = \$1,434.00 (*Balance due by July 27, 2018*)
- One parking pass is included in your package
- Receive a complimentary seatback for each season ticket reserved  
\_\_\_\_\_ or \_\_\_\_\_

**SEASON UNDERWRITER B:** Send a nonrefundable deposit of \$500.00, by July 6, 2018 to receive a 10% fee reduction.

- \$2,275.00 - \$227.00 - \$500.00 = \$1,548.00 (*Balance due by July 27, 2018*)
- Parking Pass an additional \$150.00 (Please check the appropriate box)
- Receive a complimentary seatback for each season ticket reserved

Yes, I want parking

No, I do not want parking

## CONTINUING DENTAL EDUCATION ONLY

**Already a season ticket holder or you just want the CE only?**

- Please reserve a spot in the CE programs only.
- Please find enclosed \$1,325.00
- One parking pass is included in your package  
\_\_\_\_\_ or \_\_\_\_\_

**CDE SUBSCRIBER A:** Send a nonrefundable deposit of \$250.00

by June 1, 2018 and receive a 20% fee reduction for the CE programs only.

- \$1,325.00 - \$265.00 - \$250.00 = \$810.00 (*Balance due by July 27, 2018*)
- One parking pass is included in your package  
\_\_\_\_\_ or \_\_\_\_\_

**CDE SUBSCRIBER B:** Send a nonrefundable deposit of \$250.00

by July 6, 2018 and receive a 15% fee reduction for the CE programs only.

- \$1,325.00 - \$198.75 - \$250.00 = \$876.25 (*Balance due by July 27, 2018*)
- One parking pass is included in your package

**Fill out & fax this registration form to 210-567-6807 or call us at 210-567-3177**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Office Address \_\_\_\_\_ City/State/Zip Code \_\_\_\_\_

Office Phone \_\_\_\_\_ Fax No. \_\_\_\_\_

Email \_\_\_\_\_

Home Address \_\_\_\_\_ City/State/Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Specialty/Position \_\_\_\_\_

Dental School \_\_\_\_\_ Grad Year \_\_\_\_\_

Check (Total amount enclosed payable to UTHSCSA): Total Amount Enclosed \_\_\_\_\_

Visa

Mastercard

Discover

Card No \_\_\_\_\_ Expiration Date \_\_\_\_\_

3 security numbers on back of card \_\_\_\_\_

Card Holders Name \_\_\_\_\_

Signature \_\_\_\_\_

### FOOTBALL DENTAL STUDY CLUBS Refund Policy:

If you must cancel your registration, please notify the Office of Continuing Dental Education as soon as you determine you are unable to attend so that a refund may be considered. Due to commitments to these special programs, any cancellation made before July 15, 2018 will be subject to an administrative fee assessment of \$198.50. Any cancellation made after July 15, 2018 does not qualify for a refund. However, participants may choose to place their tuition minus an administrative and direct cost fee assessment into a holding account for future use. "No Shows" will not qualify for refunds. Written notification is required within five business days by mail, fax, or e-mail to initiate the refund process. Please allow four to six weeks for all refunds. Deposits and the cost of football tickets are nonrefundable.