

# Housing and Registration Form



107<sup>TH</sup> ANNUAL MEETING

November 4-7, 2021 | Miami Beach

American Academy of Periodontology



## How to Register

Please complete all applicable sections (one professional registrant per form) prior to submitting the registration form. Forms submitted without payment information will not be processed. Acceptable forms of payment are checks drawn on a U.S. bank in U.S. dollars made payable to the American Academy of Periodontology or credit cards (Visa, MasterCard, Discover or American Express only). In order to receive the member rate, 2021 membership dues must be paid prior to registration.

Registration forms must be received by 11:59 pm EDT on Monday, March 29, 2021, for Early Bird pricing. Confirmations will be emailed. Allow 72 hours for receipt. Contact Maritz Global Events at +1-864-208-3363 if you do not receive your information within this time period.

**Online** (preferred method)

[perio.org/meetings](http://perio.org/meetings)

**Mail** (check or credit card)

Maritz - ATL FSS Department  
1375 North Highway Drive, 8th floor  
Fenton, MO 63099

**Phone** (credit card payment via web)

+1-864-208-3363

## Personal Information *City and state provided will be printed on your badge.*

AAP Membership # \_\_\_\_\_ (required for members)

- Check here if you are an ABP Diplomate  
 Check here if you are a first-time attendee

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Call Name for Badge \_\_\_\_\_  DDS  DMD  RDH  Other (specify) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Postal Code \_\_\_\_\_ Country (other than USA) \_\_\_\_\_

Phone (mandatory) \_\_\_\_\_ Fax \_\_\_\_\_ Email (mandatory) \_\_\_\_\_

Emergency Contact (mandatory) \_\_\_\_\_ Phone \_\_\_\_\_

- AAP recognizes the need to comply with the Americans with Disabilities Act. Please check here if you have special needs, including dietary restrictions. A Maritz Global Events staff member will contact you regarding your requirements.

Demographic Information:  Male  Female Years in practice:  0-5  6-10  11-15  16-20  21+

Section A   Registration Categories		(Select One)		
		Early Bird	Advance	On Site
<b>MEMBERS</b>				
<input type="checkbox"/> <b>RG01</b> Active Member		\$790	\$919	\$1,036
<input type="checkbox"/> <b>RG02</b> Associate Member		\$790	\$919	\$1,036
<input type="checkbox"/> <b>RG03</b> International Member		\$790	\$919	\$1,036
<input type="checkbox"/> <b>RG04</b> Life Active Member		\$790	\$919	\$1,036
<input type="checkbox"/> <b>RG05</b> Retired Member		\$442	\$560	\$689
<input type="checkbox"/> <b>RG06</b> Student Member		\$230	\$347	\$466
<input type="checkbox"/> <b>RG07</b> General Assembly Only <small>Only available to Active/Life Active members; no meeting participation</small>		Complimentary		
<b>NON-MEMBERS/OTHER</b>				
<input type="checkbox"/> <b>RG08</b> Non-Member Dentist/Periodontist		\$1,679	\$1,817	\$1,955
<input type="checkbox"/> <b>RG09</b> Sponsored Non-Member Dentist/Periodontist <small>Sponsor Code:</small>		\$1,501	\$1,639	\$1,778
<input type="checkbox"/> <b>RG10</b> Dental Student Interest Group (DSIG)		\$70	\$99	\$129
<input type="checkbox"/> <b>RG11</b> Non-Member Student		\$355	\$475	\$720
<input type="checkbox"/> <b>RG12</b> Dental Hygienist Full Conference		\$504	\$648	\$784
<input type="checkbox"/> <b>RG13</b> Office Staff		\$504	\$648	\$784
<input type="checkbox"/> <b>RG14</b> Spouse/Guest Name:		\$156	\$156	\$156
<input type="checkbox"/> <b>RG20</b> Exhibits Only Registration		\$100	\$150	\$200
<input type="checkbox"/> <b>RG21</b> Student Exhibits Only Registration <small>(on site only; must present a valid student ID)</small>		N/A		\$25
<b>Section A   Registration Categories Total</b>		<b>\$</b>		

Save time and register online at [perio.org/meetings](http://perio.org/meetings)



**Section B | Housing/Hotel Selection**

Rank hotels (1, 2 or 3) by preference and check occupancy for each (one room per professional registrant)

Fontainebleau Miami Beach Run of House	<input type="checkbox"/> \$279 Single	<input type="checkbox"/> \$279 Double	<input type="checkbox"/> \$309 Triple	<input type="checkbox"/> \$339 Quad
Gale Hotel Run of House	<input type="checkbox"/> \$199 Single	<input type="checkbox"/> \$219 Double	<input type="checkbox"/> \$239 Triple	<input type="checkbox"/> \$259 Quad
Sagamore Hotel Studio Suite	<input type="checkbox"/> \$199 Single	<input type="checkbox"/> \$199 Double		
Sagamore Hotel King Suite	<input type="checkbox"/> \$239 Single	<input type="checkbox"/> \$239 Double		
Sagamore Hotel Double Suite	<input type="checkbox"/> \$259 Single	<input type="checkbox"/> \$259 Double	<input type="checkbox"/> \$259 Triple	<input type="checkbox"/> \$259 Quad
Confidante Miami Beach Run of House	<input type="checkbox"/> \$259 Single	<input type="checkbox"/> \$259 Double	<input type="checkbox"/> \$284 Triple	<input type="checkbox"/> \$309 Quad
Hyatt Centric Run of House	<input type="checkbox"/> \$250 Single	<input type="checkbox"/> \$250 Double	<input type="checkbox"/> \$280 Triple	<input type="checkbox"/> \$280 Quad

A credit card guarantee is necessary at the time of booking (expiration date of 11/21 or later). Maritz Global Events will forward the credit card information to your hotel. The hotel will charge a one night's room and tax deposit to the credit card upon receipt of the reservation data in October 2021. Rates shown are inclusive of a \$14 per room per night rebate to Maritz Global Events.

 **No hotel reservation needed** (If staying outside the AAP room block, Indicate hotel): \_\_\_\_\_

 **Special needs**  Audio  Visual  Mobile  Other: \_\_\_\_\_

 **I plan to share a room with** (full name): \_\_\_\_\_

**Arrival Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Departure Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Section C | Housing/Hotel Selection Total** \$ \_\_\_\_\_
**Liability Waiver And Payment Information (required)**

By registering for this meeting, I acknowledge and assume all risks associated with participation in the meeting and any associated events and/or activities, without limitation. I hereby knowingly waive and release the American Academy of Periodontology (AAP), the American Academy of Periodontology Foundation (AAPF), their employees, directors, officers, volunteers, agents, and successors from any and all claims, liabilities, or causes of action, including without limitation, death, bodily injury, property damage, or other loss or damages arising from my participation in this meeting and associated events and/or activities.

Signature \_\_\_\_\_

**Photography Disclaimer (required)**

The AAP and the AAPF reserve the right to photograph, videotape, and otherwise capture events and participants of this conference for unrestricted, nonexclusive, perpetual use in all media and forms of communication whether now existing or hereafter developed. By attending this conference, you acknowledge and agree that AAP and AAPF may use such images and recordings without your written permission or paying you compensation, and you permanently release AAP and AAPF, and their respective successors and assigns, from any and all claims and liability arising from or relating to the making and use of such images and recordings.

Signature \_\_\_\_\_

**Virtual Meeting Code Of Conduct Disclaimer (required)**

AAP is committed to providing a safe, productive, and welcoming environment for all meeting participants and AAP staff. All participants, including, but not limited to, attendees, speakers, volunteers, exhibitors, AAP staff members, service providers, and all others are expected to abide by this Virtual Programs Code of Conduct. This Policy applies to all AAP meeting-related events, including those sponsored by organizations other than AAP but held in conjunction with AAP events, on public or private platforms.

AAP has zero-tolerance for any form of discrimination or harassment, including but not limited to sexual harassment by participants or our staff at our meetings. If you experience harassment or hear of any incidents of unacceptable behavior, AAP asks that you inform us at meetings@perio.org or by calling 312-787-5518 so that we can take the appropriate action.

Unacceptable Behavior is defined as: Harassment, intimidation, or discrimination in any form. Verbal abuse of any attendee, speaker, volunteer, exhibitor, AAP staff member, service provider, or other meeting guest.

Examples of verbal abuse include, but are not limited to, verbal comments related to gender, sexual orientation, disability, physical appearance, body size, race, religion, national origin, inappropriate use of nudity and/or sexual images in public spaces or in presentations, or threatening or stalking any attendee, speaker, volunteer, exhibitor, AAP staff member, service provider, or other meeting guest.

Disruption of presentations during sessions, in the exhibit hall, or at other events organized by AAP throughout the virtual meeting. All participants must comply with the instructions of the moderator and any AAP virtual event staff.

Presentations, postings, and messages should not contain promotional materials, special offers, job offers, product announcements, or solicitation for services. AAP reserves the right to remove such messages and potentially ban sources of those solicitations.

Participants should not copy or take screen shots of Q&A or any chat room activity that takes place in the virtual space.

AAP reserves the right to take any action deemed necessary and appropriate, including immediate removal from the meeting without warning or refund, in response to any incident of unacceptable behavior, and AAP reserves the right to prohibit attendance at any future meeting, virtually or in person.

**PAYMENT INFORMATION****Total Amount Due From Sections A-B**

\$ \_\_\_\_\_

Card Number \_\_\_\_\_

CVC Code \_\_\_\_\_ EXP Date (MM/YY) \_\_\_\_\_

Print Card Holder's Name \_\_\_\_\_

 I have enclosed a check, drawn in U.S. funds (from a U.S. bank) in the amount of \$ \_\_\_\_\_

 Please charge my credit card in the amount of \$ \_\_\_\_\_

 MasterCard  Visa  American Express  Discover

Signature \_\_\_\_\_ Date \_\_\_\_\_