



**N.P.D.A.**  
**P.O. Box 29037 – 125 Carlton Street**  
**St. Catharines, ON**  
**L2R 7P9    www.npda.ca**

NPDA#: **NPDA Membership – Join us for another exciting year!**

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

ODA membership no.: \_\_\_\_\_

Phone: \_\_\_\_\_

What year did you first become a member of the NPDA: \_\_\_\_\_

Dear Dr.,

Please fill in the information above. Also ensure that we have your email address. The NPDA will be using email as the only method of communication with our members. Thank you for your cooperation.

Please check applicable boxes    **You must be a member of the ODA in order to join the NPDA**

<input type="checkbox"/>	Active member	\$375.00 + 13%HST = \$423.75	After July 15 \$425 +HST = \$480.25
<input type="checkbox"/>	Retired (non-practicing)	\$225.00 + 13%HST = \$254.25	After Sept. 1 \$275.00 +HST = \$310.75
<input type="checkbox"/>	First Year dentist – new graduate	\$0.00	
<input type="checkbox"/>	Honorary member	\$0.00	

Method of payment	Amount
<input type="checkbox"/> Cheque	\$ _____

**AUXILIARY attending with an NPDA MEMBER    \$100.00 + 13%HST = \$113.00 per lecture**

NON MEMBERS wishing to attend a meeting are welcome to do so at the following rates:

NON MEMBER DENTIST (per meeting)    \$375.00 + 13%HST = \$423.75

AUXILIARY OF THE NON MEMBER DENTIST (per meeting)    \$200.00 + 13%HST = \$226.00

**Please include this form with your payment—make your cheque payable to NPDA.**  
 Your badge will be available at the sign-in table. If you would like your badge and receipt mailed to you office, please include a stamped, self-addressed envelope with your cheque.

NPDA Executive