



Florence (I)  
MAY 10-11, 2024

Continuing Education Course  
For Dentists, Dental Hygienists and Students

# PERIODONTAL AND PERI-IMPLANT PLASTIC SURGERY



## REGISTRATION FROM

### Reserved to SidP International Members

#### PARTICIPANT'S DATA:

Name \_\_\_\_\_ Surname \_\_\_\_\_

Address \_\_\_\_\_

Zip Code \_\_\_\_\_ City \_\_\_\_\_ Country \_\_\_\_\_

Tel. \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_ @ \_\_\_\_\_

ID number issued by the relevant revenue authorities \_\_\_\_\_

Attendance to the Course is open to Dentists, Oral Hygienists, Students attending the faculty of Dentistry and Prosthodontics, Students attending the faculty of Dental Hygiene.

Official language: the official languages of the Course are Italian and English. Simultaneous translation will be provided from Italian to English

I **do not** attend the SidP 23<sup>rd</sup> National Congress thus I will participate in the Course **free of charge**

I attend the SidP 23<sup>rd</sup> National Congress thus I **will pay the registration fee in the Course**

**INVOICING DETAILS:** Company/Name-Surname \_\_\_\_\_

Address \_\_\_\_\_

Zip Code \_\_\_\_\_ City \_\_\_\_\_ Country \_\_\_\_\_

Tax Payers Code No. (mandatory) \_\_\_\_\_

VAT CODE (mandatory if applicable) \_\_\_\_\_

#### Registration Fee (VAT included)

SidP International Ordinary Member 2024 € 100

SidP International Dental Hygienist Member 2024 € 100

SidP International Student Member (Faculty of Dentistry) 2024 € 60

SidP International Student Member (Faculty of Dental Hygiene) 2024 € 60

[www.sidp.it](http://www.sidp.it)

To be sent to: [segreteria@sidp.it](mailto:segreteria@sidp.it) ▪ Fax +39 055 2345637