

REGISTRATION FORM

Music City Dental Conference 2026 | May 7-9, 2026 | Nashville, TN | Renaissance Nashville Hotel



HOW TO REGISTER

Two Ways to register:

1 **ONLINE** at MusicCityDentalConference.com

Secure your place in limited-attendance sessions and finalize your schedule instantly by registering through our online registration portal.

Need assistance? Contact our registration provider, Eleventh & Gather, at 678-341-3000.

2 **IN PRINT** By Mail, Email, or Fax

Complete the registration form below and return it with your payment.

**Printed registrations do not guarantee placement in limited-attendance sessions.*

MAIL: Eleventh & Gather
6840 Meadowridge Court
Alpharetta, GA 30005

EMAIL: MCDC@prereg.net
FAX: 678-341-3099

IMPORTANT INFORMATION

- ▶ **Registration includes** CE courses & events in the general registration category. *Basic Life Support (BLS) Training hands-on course and Awards Luncheon require separate fees. Onsite registration is limited for the Awards Luncheon. Onsite registration is not available for the BLS hands-on course.
- ▶ **To receive CE credit**, each attendee must use an individual, personal email address to register. **Office email addresses will not be accepted.**
- ▶ **Preregistration Deadline | March 16**
Register by March 16, 2026 to receive early bird pricing.
- ▶ **Cancellation Deadline | April 14**
Refunds and cancellation requests must be submitted to our registration provider, Eleventh & Gather, via email (mcdc@prereg.net). Registration minus a \$50 administrative fee will be refunded for requests received before April 14, 2026. No refunds issued after April 14, 2026.
- ▶ **Print Registration Closed | April 21**
Print registrations must be submitted by April 21. Anyone registering after April 21, 2026 must register online or onsite.

GENERAL REGISTRATION: CHECK ONE OF THE FOLLOWING

Registration Category	Early Bird	After 3/16	Amount
<input type="checkbox"/> TDA Member Dentist*	\$389	\$429	_____
<input type="checkbox"/> ADA Member Dentist*	\$429	\$489	_____
<input type="checkbox"/> Non-Member Dentist	\$699	\$899	_____
<input type="checkbox"/> TDA Early Career Dentist*	\$199	\$229	_____
<input type="checkbox"/> TDA New Dentist*	\$359	\$419	_____
<input type="checkbox"/> ADA Active Military Dentists	\$389	\$429	_____
<input type="checkbox"/> RDH, RDA, Dental Staff	\$199	\$249	_____
<input type="checkbox"/> Retired Dentist (Rate 7 or W)*	\$199	\$249	_____
<input type="checkbox"/> Guest *	\$99	\$129	_____
<input type="checkbox"/> TN Dental Student*	\$0	\$0	_____

Onsite registration available for an additional fee.

ADDITIONAL TICKETS

Registration Category	Early Bird	After 3/16	Amount
<input type="checkbox"/> Basic Life Support Training - Hands-On	\$100	\$125	_____
<input type="checkbox"/> Awards Luncheon - MCDC Registrant	\$29	\$39	_____
<input type="checkbox"/> Awards Luncheon - Ticket Only/No CE	\$49	\$59	_____

Thurs., May 7, 2026 | 12 p.m. – 5:15 p.m. | 4 hrs CE
Basic Life Support Training (BLS) Including CPR and AED

Notes:

* Membership in the ADA & TDA will be verified.

* TDA Early Career Members (Graduated 2022-2025)

* TDA New Dentists (Graduated 2017 - 2021)

* Guest registration is for a non-dentist guest and can only be added to a fully-registered attendee.

* Dental students must be enrolled in a Tennessee Dental School and may attend courses and MCDC Exhibit Hall for free.

* No CE is granted for the registration categories of "Guest," "Award Luncheon Only," or "Retired Dentists."

REGISTRANT INFORMATION: ONE REGISTRANT PER FORM

ADA ID # _____	Local Society (TDA Members Only) _____	
First Name _____	Last Name _____	
Office Address _____		
City _____	State _____	Zip Code _____
Daytime Number _____	Cell Number _____	

Email address (*CE certificates will be sent to this address. Personal email addresses only. No office email addresses accepted)

REGISTRATION PAYMENT INFORMATION

TOTAL FEES FOR REGISTRANT: \$ _____

☐ **CHECK** (payable to the TDA)

☐ **CARD #** (Visa/MasterCard ONLY) _____

NAME ON CARD _____

EXPIRATION DATE _____ **CVV CODE** _____

BILLING ZIP CODE _____ **TOTAL AMOUNT \$** _____

Signature _____

SIGNATURE INDICATES APPROVAL OF CHARGES TO YOUR ACCOUNT

Please return form with payment to Eleventh & Gather:

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