



**2008 SOTO-USA Clinical Symposium
October 23-26, 2008**



Dentocranial, Sacro Occipital Technique and Allied Health

MCM Eleganté Hotel & Suites Dallas

Location: 2330 W Northwest Hwy, Dallas, Texas • 214-351-4477

REGISTRATION INFORMATION

Please send the following information by:

fax: (336) 372-1541

email: sotousa@skybest.com (call credit card numbers in)

telephone: (336) 793-6524

mail: SOTO-USA, PO Box 1357, Sparta, NC 28675

NAME: _____ PHONE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

COUNTRY: _____ EMAIL: _____

RATES	BEFORE 9/30/08	AFTER 9/30/08	AT THE DOOR
Doctor	\$625	\$675	\$695
SOTO-USA Doctor Member	\$425	\$475	\$495
Student	\$275	\$300	\$325
SOTO-USA Student Member	\$200	\$225	\$250
Doctor or Student	Special Luncheon & Lecture • \$15		

Doctors	Are You a Current SOTO-USA Member?	Students
\$150		\$90

Symposium Fee	+	Membership Fee	+	Luncheon Fee	=	Total
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METHOD OF PAYMENT: Check Money Order Mastercard Visa

Fax Registration with Credit Card Info to: (336) 372-1541

CARD # _____ EXP. DATE: _____

Signature: _____

Or mail Check or Money Order with registration form to SOTO-USA, PO Box 1357, Sparta, NC 28675.