

The Newsletter of the International Academy for Dental-Facial Esthetics



September 2010

Vol. 10 No.

Nominate your Colleagues !

Recognize your successful professional colleagues by nominating them for ADFE Fellowship! E-mail your colleague's Name, E-mail and Telephone number to info@iadfe.org

Reminder to renew your IADFE membership for 2011! These are the only funds that the Academy receives for its ongoing functions.

Membership is still \$95.00 USD per year

Visit www.iadfe.org and renew online
OR

E-mail, call or fax information
info@iadfe.org

Tel +1-905-513-0131 - Fax +1-905-513- 6560.

2011 Membership fees are due NOW... this includes your **Harmonie Club dinner** at the annual New Fellows Induction Ceremony at the **Greater New York Dental Meeting**.

The Regents are now accepting nominations for 2010 Fellowship Inductees. The Annual Fellowship Meeting will take place in conjunction with the Greater New York Dental Meeting. The Fellowship Cap and Gown ceremony, for which inductees must be present, will be held on **Monday, November 29th at 6:00PM** at the New York Marriott Marquis. (Duffy and Columbia rooms, 7th Floor). Immediately following, there will be a cocktail reception and dinner meeting at the Harmonie Club.

See you in New York !! November 29th 6PM

**6 pm Marriott Marquis—New Fellow Induction
& Dinner at the Harmonie Club
4 East 60th St New York, NY**

We Need Your Support

IADFE Membership Renewal Dues Notice



Your 2011 Membership Dues.

assure continued listing in the online IADFE membership directory,
use of the IADFE logo on your business communications,
& entrance to the Annual Fellowship Induction Dinner at the Greater New York Dental Meeting.

All this for only \$95.00 per year!

How to renew your IADFE membership!

- 1. Visit www.iadfe.org and renew online.** Online renewal can be securely made from the IADFE website using a Visa, Master Card, American Express, or Discover credit card.
- 2. Complete the form below** and send payment IADFE Toronto Office **FAX +1-905-513-6560 or info@iadfe.org.** If paying by credit card, be certain to sign the form in the space provided and make a copy for your records. **Mail to :**
654 Madison Avenue Suite 1001 New York, NY 10021
- 3. Contact** Jennifer at IADFE with your payment information **info@iadfe.org**

Membership dues: \$95.00 per year.

Members who submit their membership dues may also attend the Academy's Annual New Fellow reception and dinner during the Greater NY Dental meeting at NO CHARGE. (Non-renewed members & guests pay \$110.00 to attend.)

Enclosed is payment of \$95.00 to renew my AD FE membership for 2011 **(PLEASE PRINT)**

Title Dr. Mr. Mrs. Ms Name

Name _____

Address _____

City _____ State _____

Zip Code _____ Country _____

E-mail _____

Telephone _____

Fax _____

I prefer to renew my IADFE Fellowship via credit card. Credit Card type: Visa MC AMEX

Cardholder name: _____

Credit card #: _____

Expiration date: _____

Cardholder Signature _____

I will be attending the 2009 Annual New Fellow Dinner ___ Yes ___ No

of Additional Guest @ \$110.00/person _____

Total amount to be billed to my credit card \$ _____