

## 2022 HINMAN ATTENDEE MAILING LIST ORDER FORM

Name: \_\_\_\_\_  
Firm/Organization: \_\_\_\_\_ Booth#: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-Mail: \_\_\_\_\_



Please use this order form to purchase a list of the registered attendees to the Thomas P. Hinman Dental Meeting. If you wish to place more than one order, please duplicate this form. FULL PAYMENT must accompany each order. Georgia residents please add 7% sales tax. Make your check payable to Eleventh & Gather. ***\* This list is intended for exclusive use by Hinman exhibitors and shall not be resold or reproduced. Those who purchase this list are only authorized to use the list for a single, one-time mailing.***

**Check which you prefer:**

- 2022 Pre-registration List (available as of February 17, 2022)
- 2020/2021 Final Show List
- 2022 Post-meeting List

**List information:** (e-mail address provided **IF** registrant opted to supply)  
\*complete attendee file, sent via e-mail: **\$ 650.00**

The following fields will be included in the data:

First name  
Last name  
Job title  
Company  
Address1  
Address2  
City  
State/province  
Zip code  
Country  
Phone  
E-mail (if registrant opted to provide)  
Registration category

\*please note for the pre-registration list, only the data collected up and until February 15, 2022 will be sent.

**TOTAL:** \_\_\_\_\_

**(GEORGIA RESIDENTS ADD 7% SALES TAX)**

✓ Please ensure that all boxes have been appropriately marked before sending.

**Credit card orders ONLY may be faxed to (678) 341-3099**

Payment Type:  Visa  Mastercard  American Express  Check \_\_\_\_\_

Card Number: \_\_\_\_\_

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**Please mail completed order forms and payment to:**

**Eleventh & Gather**  
6840 Meadowridge Court  
Alpharetta, GA 30005

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\*Printed mailing labels available upon request; call for pricing