

Registration 2020

Doctor's Name: _____

Accompanied By: _____

Street Address: _____

City: _____ State: _____ Zip/Postal Code: _____

Is this also your credit card billing address? (If not please add): _____

Telephone (Office): _____ (Home): _____

CC billing phone if different: _____ Email Address: _____

Arrival Date: _____	Departure Date: _____
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Please fill out one:

Hotel Selected: _____	Or, Villa Selected: _____	Agency: _____
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- **Please complete all forms and send a \$1500 check for the Conference Registration Fee to our NJ address on the homepage. The fee includes our Sunday night Welcome Cocktail Party, Tuesday evening event and Thursday night dinner and entertainment + other amenities.** We will book your hotel room as selected or your villa choice. **If you have already booked a villa, please indicate it at the top of page 3.** Upon receipt of your registration, you will receive a confirmation from us. You will also be contacted either by your hotel or the villa agency. Payment to the hotels will be in Euros and payment for the villa rental will be in US dollars. Please see your selected hotel's web site for details, tax info, cancellation and change policies.
- The hotel rates below include a room for two and breakfast where indicated. Most registrants arrive earlier or extend after the meeting dates.
- *The SBDA earns commissions from each hotel, villa and car reservation we make and these commissions help fund the cost of organizing the conference and keep the registration fee low. If you reserve accommodations or a car directly, use a villa agency other than one of the four we recommend, or reserve through a travel agent you will be charged a \$2100 event registration fee.*
- Check our web site (www.saintbarthdental.com) for additional information regarding transportation, island and program information. Please don't hesitate to contact us at 212-645-6139 for hotel, villa rental, car or air information.

2020 Speakers and Programs:

Susan McMahon, DMD, AAACD

“A New Generation for Cosmetic Dentistry: Delivering the Smile for Teenagers and Young Adults – Conservative Treatment with Big Results”

Önder Solakoglu, MCD, MSc

“Hand, Heart, and Brain – The Triad for a Successful Periodontal and Implant Therapy in an Interdisciplinary Team”

Hotels or Villa

Please see the hotel/villa site for cancellation policy, tax/fee info and other inclusions.

Select	Breakfast	Hotel	Accommodation	Daily Rate
☐	Y	Christopher	Ocean Classic	585€
☐	Y	Christopher	Ocean Terrace	702€
☐	Y	Christopher	Ocean Junior Suite	702€
☐	Y	Christopher	Ocean Deluxe Terrace	882€
☐	Y	Christopher	Ocean Panoramic Junior Suite	882€
☐	Y	Christopher	Ocean Suite	1152€
☐	Y	Christopher	Ocean Spa Suite	1332€
☐	Y	Christopher	Ocean Panoramic Suite	1422€
☐	Y	Les Ondines	1 Bedroom Suite – Pool view w/kitchen	680€
☐	Y	Les Ondines	1 BR Suite 2 nd level – Beachfront w/kitchen	850€
☐	Y	Les Ondines	1 Bedroom Master Suite 2 nd level – Beachfront w/kitchen	1250€
☐	Y	Les Ondines	2 Bedroom beach level or 2 nd level – Beachfront w/kitchen	1485€
☐	Y	Les Ilets de la Plage	Beach Villa – 1 Bedroom	Sold out
☐	Y	Les Ilets de la Plage	Grand Ocean View Villa – 2 Bedrooms	€740
☐	Y	Les Ilets de la Plage	Garden Villa – 1 or 2 Bedrooms	Sold out
☐	Y	Les Ilets de la Plage	Garden Villa – 3 Bedrooms	€850
☐	Y	Le Barthelemy	Le Barth Jardin (Garden)	Please inquire
☐	Y	Le Barthelemy	Le Barth Lac (Lake)	inquire
☐	Y	Le Barthelemy	Le Barth Ocean	inquire
☐	Y	Le Barthelemy	Ocean Luxury Jr. Suite	inquire
☐	Y	Le Barthelemy	Ocean Luxury Private Pool	inquire
☐	Y	Le Barthelemy	La Plage Suite	inquire
☐	Y	Le Toiny	Junior Suite w/pool OV	From 1980€
☐	Y	Le Toiny	Spirit Suite w/pool OV	From 2150€
☐	Y	Le Toiny	Signature Suite w/pool OV	From 2350€
☐	Y	Le Toiny	Duplex Spirit Suite w/pool OV	From 2550€
☐	Y	Villa Lodge 4 Epices	Lagoon Suite - 2 BR OV Private Jacuzzi	€
☐	Y	Villa Lodge 4 Epices	Saffron Suite - 2 BR, Living room, OV	€
☐	Y	Villa Lodge 4 Epices	Anis Etoile Suite – 2 BR OV - private pool, Living Room, kitchen	€

Villa Request

Villa ☐ Agency: _____ Villa Name: _____ Weekly Fee

Auto Request

Driver Name #1: _____

Driver Name #2: _____

Driver License Number #1: _____ State: _____

Driver License Number #2: _____ State: _____

Driver's Mailing Address: _____

Car Requested: _____



or

Exp : ____ / ____



Exp : ____ / ____

Name on Credit Card: _____

Please check with your insurance company and credit card companies to determine if you must insure your rental car

All vehicles are automatic and air-conditioned. Please choose carefully; it may be difficult to change vehicles upon arrival.

- Car Type:
- ☐ \$55/day Hyundai Grand i10
 - ☐ \$61/day Landwind X2 SUV
 - ☐ \$70/day Daihatsu Terios 4WD (very limited supply)
 - ☐ \$76/day Tivoli 4WD
 - ☐ \$80/day Korando 4WD
 - ☐ \$115/day Jeep Wrangler Convertible - 2 door
 - ☐ \$125/day Jeep Wrangler Convertible - 4 door
 - ☐ \$90/day Mini-Cooper Convertible
 - ☐ \$115/day Mini-Cooper Convertible - **New Model!**
 - ☐ \$90/day BMW Serie2 Convertible
 - ☐ \$125/day Rexton 4WD, 4 door, 7 seats
 - ☐ \$135/day Mini Van Rodius, 4WD, 4 door, 9 seats

