



Bundesverband der implantologisch
tätigen Zahnärzte in Europa e.V.
European Association of Dental Implantologists

MEMBERSHIP REGISTRATION FORM

I hereby apply for a membership in the BDIZ EDI
(European Association of Dental Implantologists)

Name:

First Name:

Country:

Zip Code/City:

Street:

Phone:

Fax:

E-Mail:

Homepage:

Date of Birth:

Practicing implantology since:

Member of other Societies:

☐ ICOI ☐ BDO ☐ DGI ☐ DGZI ☐ DGMKG ☐ EAO

Continuing education Courses:

.....

Fellowship status / diplomate status in implantology

☐ Yes ☐ No ☐ Organisation

Entry in BDIZ EDI Directory: ☐ Yes ☐ No

(For information on BDIZ EDI Directory of Implant Dentists see overleaf)

The annual membership fee for:

FULL MEMBERSHIP

☐ Full member – clinical EUR345.00

☐ Assistant dentist / young professional
(up to 5 years after graduation) EUR172.50

☐ Second membership / family member EUR172.50

EXTRAORDINARY MEMBERSHIP

☐ Co-operative Member EUR165.00
(Professionals without practice
and dental technicians)

☐ Students non-contributory

☐ Supporting Membership EUR530.00
(Companies etc.)

Payment

Membership cannot be confirmed until payment is processed. Method of
payment is by bank transfer. Please use the following banking account

Commerzbank Bonn

Account Number: 310 144 100
Bank Code: 380 400 07
IBAN: DE96 3804 0007 0310 1441 00
BIC: COBADEFFXXX

Membership cards will be sent upon receipt of the annual
subscription fee.

City/Date:

Seal/Signature:

Please return the completed registration form to:
European Association of Dental Implantologists e.V.
Lipowskystr. 12 · 81373 Munich · Germany
Phone: + 49 89 7206-9888, Fax: + 49 89 7206-9889
E-Mail: office@bdizedi.org, Homepage: www.bdizedi.org

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office@bdizedi.org • www.bdizedi.org

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CERAMIC IMPLANTS STATE OF THE ART

8TH ANNUAL MEETING OF
ISMI | INT. SOCIETY
OF METAL FREE
IMPLANTOLOGY



**3-4 MAY 2024
HAMBURG**



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