

# HINDS SYMPOSIUM REGISTRATION

April 24-25, 2026

Online registration available at [HSOMS.org](http://HSOMS.org)

For payment by check, please use this form.

NAME \_\_\_\_\_ DEGREES \_\_\_\_\_

OFFICE ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

EMAIL \_\_\_\_\_

Please select choice of attendance:

Symposium Registration Fee \$1,100 \_\_\_\_\_  
(After 4/10/26 - \$1200)

Golf Tournament \$375 \_\_\_\_\_

Resident Registration Fee \$100 \_\_\_\_\_

Office Staff Registration (List Attendees) \_\_\_\_\_ @ \$175/ea. \$ \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Total \_\_\_\_\_

Make checks payable to: HOUSTON SOCIETY OF ORAL & MAXILLOFACIAL SURGEONS

Mail to: HSOMS  
ATTN: Teresa Granhold  
2800 Broadway, #C153  
Pearland, TX 77581

Inquiries: Teresa Granhold (832) 736-2211 • [Teresa@hsoms.org](mailto:Teresa@hsoms.org)

*Requests for cancellation and refund of registration fees must be made in writing to Teresa Granhold by April 10, 2026. The cancellation date will be determined by the emailed or post marked date. No refunds will be provide to non-attendees or to registrants whose written notification is emailed or post dated after April 10, 2026.*