



DATE Monday 24th July

TIME Registration 6.15pm Course 6.30pm-9.30pm

VENUE University Club Hackett Drive Crawley

FEE (inc GST) \$187.00 Limit: 47 (includes 3 course dinner)

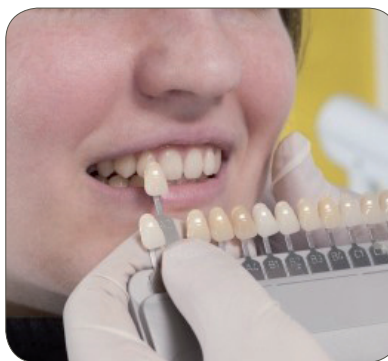
CONVENOR Dr Jenny Ball

CPD HOURS: 3

Shade communication with the dental laboratory is paramount to success. Fortunately with today's digital tools the process is much easier than ever before. Distance is not a barrier any more. With digital photographs, dentists and technicians can communicate from every corner of the world. Nevertheless with these great tools, we have to learn how to use them properly, since every tool is just a tool if we don't know how to operate them. In this lecture Szabi will explain the optical properties of the natural tooth, the fundamentals of shade selection and his protocol for shade photography and communication. He'll also share his tips and tricks about dental photography.

About the Presenter:

Mr Szabolcs Hant is a master dental ceramist and photographer. He commenced his study in 1993 in Hungary, where he was lucky to meet and learn from the great ceramist masters around Europe. In 2004 he became a Hungarian Master Dental Technician. In 2006 Szabi established his own laboratory. In 2010 he moved to Perth. He has teamed up with Dr Tony Rotondo, a prosthodontist from Brisbane to develop a successful photo communication protocol. He is the Hungarian Ivoclar Hungarian opinion leader. In recent years Szabi has delivered a number of lectures and hands-on courses on ceramics and dental photography.



WA DENTAL CPD 2017 Registration Form

I am a member of the ADA Yes No (please circle Branch) WA / SA / VIC / NSW / QLD / TAS / NT

Online registration and secure payment available on the ADA WA website www.adawa.com.au CPD area STRICTLY Attendees paying regular course fee ONLY

Course Name: _____ Course Date: ___ / ___ / ___

Please use block letters when filling in your details.

Name of Employing Dentist (required for practice staff)

Registration form grid with fields for Title, Given Name, Surname, Postal Address, Work Phone, Mobile Phone, and Email Address.

Additional Participants: (Names) _____ Special Dietary Vegetarian Gluten Free Requirements: Lactose Free Other: _____

Please Note: Non ADA Members add 50% to course fee (UWA School of Dentistry staff, practice staff & members of other ADA branches exempt)

Payment: Total Amount: AUS \$ _____ (includes GST)

Credit Card: Mastercard Visa AMEX Diners

Card Number: _____ Expiry Date: ___ / ___

Cardholder Name: _____ Signature: _____

Fax completed form to ADA WA Branch +61 8 9321 1757 or email to cpd@adawa.com.au

Cheque: Make cheque payable to ADA WA Branch Inc and post to PO Box 34, West Perth WA 6872 with your Registration Form.

No Certificate of Attendance will be issued. A receipt/tax invoice will be provided showing the course name and CPD hours for your records.

Bookings, Course & Payment Enquiries: ADA Office +61 8 9211 5600 Email: cpd@adawa.com.au

Other Enquiries: Dr Jenny Ball 0419 044 549 jenny@adawa.com.au

Please note: Your registration for these events indicates acceptance of the CPD Terms and Conditions contained in the WA Dental CPD 2017 Course Book.