



DATE Saturday 19th August & Sunday 20th August

TIME Sat: Registration 8.45am Course 9am-5pm Sun: 9am-5pm

VENUE OHCWA 17 Monash Ave Nedlands

FEE (inc GST) \$1,650.00 Limit: 20 (includes lunch, morn/aft teas)

CONVENOR Dr Jenny Ball

CPD HOURS: 14

This course is designed for practitioners who are interested in providing multiple ceramic restorations for their patients.

- Lecture Component 1. Recognition of appropriate cases 2. Case work up 3. Treatment staging and coordination 4. Relevant practical procedures 5. Material options

- The practical component will focus on: 1. Tooth Preparation for Multiple Ceramic Veneers 2. Tooth Preparation for Multiple Ceramic Crowns 3. Predictable Impression Techniques 4. Digital Impression Techniques 5. Occlusal Registrations 6. Provisional Restoration manufacture 7. Bonding/Cementation Protocols

There will be a substantial practical hands-on component to this course.

About the Presenters: Dr Asheen Behari is a general practitioner in private practice in Claremont, Perth. Dr Paul Gorgolis is a general practitioner currently in private practice in Perth.



WA DENTAL CPD 2017 Registration Form - DENTISTS

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.

Form 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.