

UT College of Dentistry
2018 Coronal Polishing Course

You can register online or you can use this form! Register online at www.uthsc.edu/dentistry/CE
Please complete the form and return with the course payment fee of \$275.00 to: University of Tennessee Health Science Center, Continuing Dental Education, 875 Union Avenue, Room C106A, Memphis, TN 38163. Question should be directed to UT office at (901)448.5386, fax: 901.448.1514.

A \$50 fee will apply to all cancellations and transfers. NO refunds will be made for cancellations received within two weeks of the course date.

Please Print or Type

Name: _____
(Last) (First) (Middle) (Maiden)

Home Address: _____
(Address) (City, State, Zip)

Home Telephone Number: (_____) _____ Cell Number (_____) _____

Email address
(*please print*) _____

Last 4 digits SS # _____ TN Registration #: _____ Date of Registration: _____

IMPORTANT - THIS FORM MUST BE SIGNED BY THE INDIVIDUAL

By signing this application, I attest to the fact that I am a registered dental assistant with the Tennessee Board of Dentistry:

(Individual's Signature) Date

Please print present employer's name: _____

Office Address: _____

Office Telephone Number: (_____) _____

IMPORTANT NOTICE - If the number of attendees does not reach the limit, the course may be cancelled and participants may be moved to another course.

Please check one:

- Memphis, TN July 21 and July 22, 2018 (Clinical and post-test)

Registration and Cancellation Deadline is Two Weeks Prior to Course Date
(each course is limited attendance - **course may be sold out before the registration deadline**)

- Check enclosed (made payable to University of Tennessee Health Science Center)
 Credit Card / MasterCard or Visa ONLY

Exp Date _____ Security Code _____

Name on card _____