

# Membership Information



## Broward Dental Research Clinic

A non-profit corporation in affiliation with  
Broward College



As a new member or returning member of the Broward Dental Research Clinic, you are requested to specify your class preferences on the course selection form (on back). All requests will be matched according to preference on a first-come, first-serve basis. Some study groups have limited enrollment.

- You may enroll in one section for all sessions or choose from various sections and sessions.
- You will receive written notice of the section/sessions in which you have been enrolled.
- First time member reduced fee \$100. Returning dentist membership fee \$120. Fifty dollars of the dentist dues will go into the dental assisting/dental hygiene scholarship fund.
- All new members are reminded to complete the application below in addition to the course selection form.
- NEW MENTOR PROGRAM - Returning members mentoring a new member will pay a combined fee of \$160.

### NEW Membership Application

I, \_\_\_\_\_, being a duly licensed Florida dentist, do hereby apply for membership in the Broward Dental Research Clinic. I certify that I am presently carrying professional liability insurance in the minimum amount of \$250,000/\$500,000.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please return completed card, fees, and proof of insurance in the enclosed business reply envelope.**



## Course Selection

Please make your selections below and return in the enclosed business reply envelope.



Orthodontics for the General Practitioner

Tuesday, 12-4 PM

Nov. 2  Jan. 11  Feb. 1  March 1  April 5

Endodontics

Wednesday AM

Oct. 6  Nov. 17  Jan. 12  Feb. 2  March 2  
 April 6

Advancements in Oral & Maxillofacial Surgery

Monday AM

Nov. 8  Jan. 10  Feb. 7  March 14  April 11

Hands on Dental Implants

Tuesday PM

Oct. 12 (8 am-12 noon; 1-4 pm)  Nov. 9  Jan. 18  
 Feb. 8  March 15  April 12

Prosthodontics

Thursday PM

Nov. 4  Nov. 18  Jan. 13  Jan. 27  Feb. 10  
 Feb. 24  March 17  March 31  April 7  
 April 21

Clinical Oral & Maxillofacial Surgery

Wednesday PM

Jan. 19  Feb. 9  March 16  April 13

Esthetics and Fixed Prosthodontics

Tuesday, 12:30-4 pm

Nov. 16  Jan. 25  Feb. 15  March 22  April 19

Periodontics

Wednesday AM

Nov. 17  Jan. 26  Feb. 23  March 23  April 20

Please print clearly  New member  Returning member  Returning member mentoring new member

Name \_\_\_\_\_ Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Address \_\_\_\_\_

City/Zip \_\_\_\_\_ Email address \_\_\_\_\_

Florida license # \_\_\_\_\_ Policy name \_\_\_\_\_ Policy # \_\_\_\_\_

PLEASE NOTE: Professional liability insurance in the amount of \$250,000/500,000 is required.