

NAME _____

ADDRESS _____

City _____ State _____ Zip _____

OFFICE PHONE _____

CELL/HOME PHONE _____

EMAIL ADDRESS _____

What class are you registering for? Registration deadline is 2 weeks before ate of Program.			
Continuing Education Course	Fee	Please check which course	Date of Course (write date in)
Radiology 2 Hour	\$40.00		
Coronal Polishing	\$400.00		
Sealant Placement	\$400.00		
Nitrous Oxide Monitoring/Sedation	\$150 (asst) \$250.00 (RDH)		

If you have any questions, please contact the Dental Department through email:

paula.oliver@youn2stown,kl2.oh.us or 330-744-8749

Make check/money order payable to: Youngstown City Schools and enclose this registration form. Mail to Choffin Adult Dental Asst. Program 200 E. Wood St. Youngstown, Ohio 44503

Please remember to enclose any necessary documentation for Coronal Polishing, Sealant Placement (proof of CDA, RDA, CODA and CPR card) or CPR card only for Nitrous Oxide.

You will not be registered for class until all items are received.

Classes fill up quickly and will close when full.