Broward County Dental Association & Nova Southeastern University – College of Dental Medicine

2010
Give Kids a Smile

February 6, 2010
9:00 a.m. – 1:00 p.m.
NSU - CDM First Floor Clinic

Volunteer Registration Form

Name:_____

Address:_____

City:_____State_____Zip_____

License Number:_____

Home Phone:_____Office Phone:_____

Home Fax:_____Office Fax:_____

E-mail:_____

Please Circle One: Doctor Hygienist Assistant Other

Department Assignment: Exam Restorative Oral Surgery
Endo. Hygiene Other

Preferred Volunteer Time: 8:30 a.m.- 11:00 noon or 11:00 p.m.- 2:00 p.m.
or All Day
or Other: _____

Fax to Broward County Dental Association at 954-772-0553. Do it today!