



Beyond the Basics: Intermediate CEREC® Hands-on Training

Fri. & Saturday, Nov. 9 -10, 2018 | Overland Park, KS

The Premier Midwest Dental Education Center



Description

Once you've learned the basics of CEREC® dentistry, you're ready to step up to take on more challenging cases. At our *Beyond the Basics: Intermediate CEREC® Hands-on Training* course, you'll gain the knowledge and skills to further leverage the vast capabilities of your CEREC® technology. Course instructor, Dr. Doug Schulz, has helped many of the leaders in CEREC® technology master their skills. Join us for a great learning experience and enjoy expert dental CE close to home at our beautiful high-tech education center.



Learn how to advance your CEREC® dental practice

- Preparations
- CEREC® software design
- The virtual articulator
- Materials selection and inventory
- Finishing/staining and glazing
- Bonding and cementing techniques
- Bridges
- Quadrants
- Marketing



Instructor, **Dr. Douglas Schulz**, is a graduate of the University of Iowa College of Dentistry, with a significant background in occlusion and restorative dentistry. He has been teaching the use of CEREC® for more than 14 years and has aided in the development of CEREC® products over the years as a beta tester for CEREC® milled surgical guides and software. Learn more about Dr. Schulz on our website.

Location

Corporate Lakes
Education Center
7001 W. 121st Street
Overland Park, KS 66209

Schedule

Nov 9., Friday 9am-4pm
Nov 10., Sat. 9am-4pm
Breakfast & lunch included

Tuition

Dentist & one Dental Assist. \$1,995
Additional Dental Assistant \$495



To Register visit CorpLakesEdCenter.com
or call Shelly: 913-649-3313



Registration Form

COURSE **Beyond the Basics: Intermediate CEREC Hands-on Training
Nov. 9-10, 2018**

LOCATION Corporate Lakes Education Center
7001 W. 121st Street - Overland Park, KS 66209

CONTINUING EDUCATION UNITS AGD PACE Certified Course: 14 C.E. Units

Full Name: _____

Practice Name: _____

Street Address: _____

City/State/ZIP: _____

Practice Phone: _____

Practice E-mail: _____

_____ # of Dentist + one Dental Assistant @ \$1,995
_____ # of additional Dental Assistants @ \$495

Subtotal \$ _____
Subtotal \$ _____

Tuition total: \$ _____

Payment Information

Credit card # _____

Expiration date _____ **CVV Code** _____

Name on card _____

Billing address if different than practice:

Street Address: _____

City/State//ZIP: _____

Amount of payment: _____

Signature / Date: _____

Please FAX your registration form to 913-906-0800 or e-mail to Info@CorpLakesEdCenter.com
We will phone you to confirm receipt. Questions? Call Shelly at 913-649-3313.