



## ***Dental Nurse Course in Conscious Sedation for Dentistry***

**Queen Mary, University of London, Mile End Road**

**5<sup>th</sup> & 6<sup>th</sup> March 2011**

**APPLICATION** (Please photocopy for multiple applications)

**Please return to: SAAD Course Registrations, 114 High Street, Billingshurst, West Sussex, RH14 9QS**

I wish to apply for the above course. I enclose a cheque ( payable to "SAAD" ) for the two day course including lunch and refreshments.

**Course Fees** **£360**  
*I understand this includes one year's free membership of the society*

### ***Please complete in Block capitals***

Mr / Mrs/ Miss / Ms

Last name:.....First name:.....

Experience:                    Qualified DN / Experienced DN / Trainee DN / General Nurse / Other (state)

Certificates held (if any).....

GDC Number .....

Date of Birth: .....

Employer's Name .....

Home Address:..... Work Address:.....

.....

.....

.....Postcode..... Postcode.....

Telephone:    Surgery: .....

Home: .....

Fax: .....

Email: .....

Mobile:.....

Signature of Applicant: .....

Date:.....