



CDA Participation Form

Please fill out this form so CDA can track dental society participation in Give Kids a Smile. If you have any questions, please contact Molly Woodward at molly.woodward@cda.org or call 916.554.5328.

NAME OF DENTAL SOCIETY PARTICIPATING

DATE OF EVENT

TIME OF EVENT

LOCATION

BRIEF DESCRIPTION OF EVENT

AGE OF CHILDREN TO BE SEEN

Please mail or fax this form no later than November 15, 2007.

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Sacramento, CA 95814
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