

# See you in San Francisco September 9-11, 2005

Advance Registration Deadline: August 3, 2005

FALL  
SCIENTIFIC  
SESSION



CDA  
'05



SEPTEMBER  
9-11, 2005



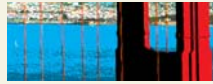
MOSCONE  
SOUTH  
CONVENTION  
CENTER



CDA-SAN FRANCISCO



CALIFORNIA DENTAL ASSOCIATION®



## MEMBERSHIP RECEPTION

### CDA Tailgate Party at SBC Park



The mild weather of September makes it the best time of the year to visit that jewel of the West Coast — the city of San Francisco.

The tail end of summer is perfect for enjoying a fun-filled evening with the family or the dental team at “baseball’s perfect address,” SBC Park.

The event begins with a CDA-hosted tailgate party that has something for everyone. The menu includes the traditional ballpark staples of burgers and dogs but also has something a little unexpected for those with seasoned taste buds: chicken, beef, ahi and portobello mushroom skewers. They will be served with a side-dish choice of cous cous, jasmine rice or, for something a little more substantial, hearty garlic mashed potatoes.

Guests at the Membership Reception can eat their fill of fabulous food and then head into SBC Park, where they will enjoy a gorgeous view of the sparkling San Francisco Bay and what is sure to be a great game — the San Francisco Giants vs. the Chicago Cubs.



**Date:** Friday, September 9, 2005

**Time:** 5:30 p.m. tailgate party  
7:15 p.m. Giants vs. Cubs

**Cost:** \$45\* guests 12 and older  
\$40\* guests 11 and younger

**Event #:** 024 (guests 12 and older)  
025 (guests 11 and younger)

*\*includes dinner, soft drinks, game tickets and transportation from Moscone Center to SBC Park.*



### Sunday Morning Brunch — Special Invitation to Members and Their Staff

Come relax and enjoy a full breakfast and exhibit hall savings.

New this year, the Session will feature a Sunday Morning Brunch for members and their staff. This special event featuring delicious food and entertainment will provide attendees the opportunity to socialize with friends, colleagues and exhibitors. The exhibit hall will open before C.E. courses begin, allowing attendees time to enjoy the brunch and take advantage of **Sunday only** exhibit floor specials. The menu will include complete brunch, coffee and orange juice.

**Date:** Sunday, September 11, 2005

**Time:** 9-10:30 a.m.

**Cost:** \$2 per person

**Event #:** 028



## SPECIAL EVENTS

### WineFUNdamentals Seminars: Exploring the Spirit of Life

WineFUNdamentals offers in-depth instruction on particular wine regions — regions that are hot on the wine radar screen. These seminars will explore wines from Tuscany and the trend-setting wines from the Napa Valley. Novice tasters and connoisseurs alike will add new depths to their wine appreciation. These seminars offer a great team-building opportunity.



winefundamentals



### Great Wines Made Under the Tuscan Sun

Come explore the wine regions of Tuscany. This WineFUNdamentals seminar will explore the Sangiovese grape variety, which is the backbone of Tuscany's wonderful Chianti wines. Attendees will learn the essentials of wine tasting, review Italian wine law, discover how to read an Italian wine label, and explore and taste wines from all over Tuscany, including the new wine phenomenon — “Super-Tuscans.” Six wines are tasted, and a wine booklet is provided.

**Date:** Saturday, September 10, 2005  
**Time:** 9:30 - 11:30 a.m.  
**Room:** Moscone South — 206  
**Cost:** \$40  
**Event #:** 026

*Attendees must be 21 years old or older. I.D. required to enter.*



### Wines of the Napa Valley

The Napa Valley has become internationally acclaimed for its wines — on par with the greatest wine regions of the world. This WineFUNdamentals seminar will explore Napa Valley's specific terroir and climate as it relates to the chardonnay and cabernet sauvignon grape. It will also identify the 14 American viticultural areas, which will give attendees information to help them recognize what they prefer when they see it on a Napa Valley wine label. Participants will also taste six Napa Valley wines and pair them with gourmet cheeses to see how the cheese changes the flavors of the wine. A wine booklet will be provided.

**Date:** Saturday, September 10, 2005  
**Time:** 1:30 - 3:30 p.m.  
**Room:** Moscone South — 206  
**Cost:** \$40  
**Event #:** 027

*Attendees must be 21 years old or older. I.D. required to enter.*

# CDA 2005 Fall Scientific Session Advance Registration Form



## Advance Registration Deadline: August 3, 2005

Friday-Sunday, September 9-11, 2005, Moscone South Convention Center

Required Courses	INSTRUCTOR	Course #	A.M./P.M.	FEE
California Law	Thomason	001	Friday	\$10
Infection Control	Cuny	002	Friday	\$10
California Law	Curley	003	Saturday	\$10
Infection Control	Carpenter	004	Saturday	\$10
California Law	Thomason	005	Sunday	\$10
Infection Control	Curley/Carpenter	006	Sunday	\$10
<b>Friday Workshops, September 9</b>				
Dental Assistants	Primer	007	a.m.	\$125
		008	p.m.	\$125
Temporaries	McDonald	009	a.m.	\$145
		010	p.m.	\$145
X-Rays	Schiff	011	a.m.	\$120
		012	p.m.	\$120
<i>TDIC Risk Management Course — See Preliminary Program for registration information.</i>				
<b>Saturday Workshops, September 10</b>				
Oral Surgery	Edwab	013	4.0 hours	\$295
Endodontics	Glassman	014	Full Day	\$375
Lasers	White/Coluzzi/Rechmann	015	a.m.	\$145
		016	p.m.	\$145
<i>TDIC Risk Management Course — See Preliminary Program for registration information.</i>				
<b>New Dentist Track, Saturday, September 10 (See Page 13)</b>				
CDA member		017		\$20
Nonmember (includes Saturday and Sunday entry into Session)		018		\$250
Dental students		019		\$10
General		020		\$20
<b>Sunday Workshops, September 10</b>				
Power Point	Freydberg	021	4.0 hours	\$145
Ultrasonics	Kwan	022	4.0 hours	\$165
Radiotherapy	Sherman	023	4.0 hours	\$175
<b>Special Events and Tours</b>				
Membership Reception/Tailgate Party (12 and older)		Event # 024	Friday	\$45
Membership Reception/Tailgate Party (11 and younger)		Event # 025	Friday	\$40
Wines Under the Tuscan Sun		Event # 026	Saturday	\$40
Wines of the Napa Valley		Event # 027	Saturday	\$40
Sunday Brunch		Event # 028	Saturday	\$2
CDA Foundation's Miles for Smiles		Event # 029	Sunday	\$25

## Registration Categories and Fees

CDA member dentists will receive one complimentary badge. Additional badges are \$10 each. Please include license number for auxiliary staff if appropriate.

Category	Registration Fees	
	Advance Reg.	On-site Fee
A CDA member dentist	Free	Free
B ADA life member	Free	Free
C ADA member residing outside of CA	\$200	\$200
D Member dentist of recognized dental society outside of U.S.	\$200	\$200
E ADA member active-duty military dentist (VA, Federal, State dentist)	\$50	\$50
F Nonmember active-duty military dentist	\$365	\$365
G Nonmember dentist	\$800	\$890
H Inactive dental license	\$250	\$250
I Dental student/CDA member	Free	Free
J Dental student/graduate/nonmember	\$25	\$25
<b>Auxiliary Registration Categories</b>		
L Lab technician	\$25	\$25
M RDA(EF) – registering with a dentist	\$10	\$20
N RDH(EF) – registering with a dentist	\$10	\$20
O DA – registering with a dentist	\$10	\$20
P Office staff – registering with a dentist	\$10	\$20
Q Guest/Spouse – not dentist	\$10	\$20
R RDA, RDH, DA, office staff and lab technician registering <b>without</b> a dentist	\$20	\$20
S International dentist working as a licensed hygienist (license number required)	\$20	\$20
<b>Other Registration Categories</b>		
DD Non-exhibiting dental dealer, manufacturer, consultant	\$150	\$150
ND Non dental professional (MD, DVM, RN etc.)	\$150	\$150

Photocopy for additional registrants.

**ADVANCE REGISTRATION DEADLINE IS AUGUST 3, 2005. REGISTER NOW!**

- You should receive your badges within three weeks of submitting your advance registration form. If your badges are not received in a timely matter, please notify our office in writing prior to the August 3 deadline.
- Workshops and events have limited seating and will be assigned on a first-come, first served basis.
- Refund requests for ticketed programs and events must be made in writing and materials returned to the CDA office no later than August 10, 2005.
- Fax your registration form to (916) 554-5937, register online at [www.cda.org](http://www.cda.org) or mail your registration to:  
CDA Scientific Session  
1201 K Street, 16th Floor  
PO Box 13749  
Sacramento, CA 95853
- Complete all areas of the registration form. Please write legibly or type. Include first and last names, badge categories (See Preliminary Program) and license numbers for the licensed dental professionals.
- CDA member dentists and one staff/guest will receive complimentary registration. All other staff/guests (non-dentists) will be charged a registration fee of \$10 per person.
- Register online as of June 16 at [www.cda.org](http://www.cda.org)

**Primary Registrant** (print or type) **Membership dues must be paid for the current year**

Name \_\_\_\_\_  
LAST, FIRST, MI  
 Mailing Address \_\_\_\_\_  
STREET, P.O. BOX, SUITE, ETC.  
 \_\_\_\_\_  
CITY/STATE/ZIP CODE  
 Area Code/Phone # \_\_\_\_\_ Area Code/Fax # \_\_\_\_\_  
 License #ADA # \_\_\_\_\_ DENTISTS AND DENTAL STUDENTS ONLY  
 E-Mail \_\_\_\_\_

Is the above address  Home  Office  Other  I do not wish to receive promotional materials  
 Please check here if you require special assistance.



**Primary Registrant** (print or type)

LAST NAME \_\_\_\_\_ FIRST NAME + MIDDLE INITIAL \_\_\_\_\_  
PRIMARY REGISTRANT ONLY

**Registration**

CATEGORY LETTER \_\_\_\_\_ LICENSE # \_\_\_\_\_ FEE \$ \_\_\_\_\_

**Staff/Guest Badges** (print or type)

1.	LAST NAME	FIRST NAME + MIDDLE INITIAL	CATEGORY LETTER	LICENSE #	FEE \$
2.	_____	_____	_____	_____	Free
3.	_____	_____	_____	_____	\$10
4.	_____	_____	_____	_____	\$10
5.	_____	_____	_____	_____	\$10
6.	_____	_____	_____	_____	\$10
7.	_____	_____	_____	_____	\$10

**Special Event Tickets:** This area is for the purchase of Membership Reception, Sunday brunch and wine seminar tickets. Please indicate the total number of tickets per event you wish to purchase in the adjacent area. Use the above area to purchase registrant specific workshop tickets.

Check or Money Order  
(PAYABLE TO CALIFORNIA DENTAL ASSOCIATION)

VISA  
 MasterCard  
 AMEX

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_  
 Signature \_\_\_\_\_  
 Printed Name \_\_\_\_\_

SIGNATURE INDICATES APPROVAL FOR CHARGES TO YOUR ACCOUNT

PLEASE PRINT NAME AS IT APPEARS ON CARD

**Workshops**

FEE \$	COURSE #	FEE \$	COURSE #	FEE \$	COURSE #	Total Fees
_____	_____	_____	_____	_____	_____	FEE \$ _____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

**Workshops** Place class # on same line as attendee's name

FEE \$	COURSE #	FEE \$	COURSE #	FEE \$	COURSE #	Total Fees
_____	_____	_____	_____	_____	_____	FEE \$ _____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

EVENT #	Fee \$	QUANTITY	Total Fees
_____	_____	X _____	_____
_____	_____	X _____	_____
_____	_____	X _____	_____

**Grand Total**

\$ \_\_\_\_\_

Have a question? Call (866) CDA-MEMBER (232-6362)