

**DR. FERNANDO DE LA PENA DENTAL CORPORATION
LOS ANGELES SCHOOL OF DENTAL ASSISTING
DE LA PENA DENTAL GROUP**

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**8-Hour INFECTION CONTROL COURSE & DENTAL PRACTICE ACT
BUNDLE REGISTRATION FORM (V2026)**

Name_____

Last Four Digits of SSN: _____Date of Birth_____

Address_____City_____State_____Zip_____

Home Phone (____) _____Work Phone (____) _____

Cell Phone (____) _____E-Mail_____

In case of emergency contact:

Name_____Phone (____) _____Relationship_____

Address_____City_____State_____Zip_____

I wish to be considered for acceptance for the course scheduled on: _____

Please download this form, fill up and mail/fax/email to the office. Please see contact info above.

Upon receipt of your registration form, we will contact you by phone for payment. For HIPAA and security reasons, payments are made with a credit card over the phone only. Your credit card information will not be stored in our system.

The fee for the course does not include PPE. It is the candidate's responsibility to bring their own PPE (Head Cap, Face Masks, Face Shield or Eye Protection, Disposable Gowns, Gloves, etc.). A candidate who does not have proper PPE may not be allowed to perform the procedures.

Instructions and Cancellation Policy for Do-At-Home 2 Hour Dental Practice Act:

*The **Dental Practice Act** part of this two-course bundle is a Dental Board of California approved home study course which meets the required 2-hour Dental Practice Act continuing education requirement towards Ca license renewal and RDA examination application.*

Upon confirmation of payment, Course Materials, Instructions Sheets and Test Sheets will e-mailed to you.

You have one month to complete the test answer sheets from the date the course is emailed to you.

The test answer sheets may be mailed, faxed or e-mailed back to us.

Upon successfully passing the test, your Certificate of Completion will be e-mailed to you.

There will be no refunds regardless of reason and the entire payment is forfeited AFTER the course materials have been e-mailed to the candidate.

Instructions and Cancellation Policy for 8-Hour Infection Control Course:

The fee for this board approved 8-Hour Infection Control Course and Dental Practice Act bundle is \$335 and part of which is a NON-REFUNDABLE processing fee of \$50.00 after registration.

You will receive an email regarding Homework Instructions that need to be submitted on the day of the class.

Any cancellations, regardless of reason, TWO WEEKS PRIOR TO THE START OF THE 8-Hour Infection Control class WILL RECEIVE NO REFUNDS WHATSOEVER AND THE ENTIRE PAYMENT IS FORFEITED. NO REFUNDS FOR NO SHOWS IN CLASS.

Student's electronic text, actual signature or digital signature below confirms acceptance of all of the above:

Signature_____Date_____