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## **2-Hour DENTAL PRACTICE ACT HOME STUDY COURSE REGISTRATION FORM (2022)**

*This 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.*

**Date:**

**Name:**

**Circle One:** DDS/DMD RDA DA RDH RDAEF **Other:**

**License Number (If Applicable):**

**Last Four Digits of Social Security Number:**

**Date of Birth:**

**Address:** **City:** **State:** **Zip:**

**Home Phone:** ( ) **Work Phone:** ( )

**Cell Phone:** ( ) **E-Mail:**

**Please CHECK one:**

( ) Please MAIL my 2-Hour DPA PACKET and CERTIFICATE to me at the address above (Cost = \$ 50.00)

( ) Please E-MAIL my 2-Hour DPA PACKET and CERTIFICATE to me at the e-mail above (Cost = \$ 40.00)

**Instructions:**

*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 arrangements.*

*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.*

*Upon confirmation of payment, Course Materials, Instructions Sheets and Test Sheets will be mailed or e-mailed to you. There will be no refunds regardless of reason AFTER the course materials have been mailed or emailed to the candidate and the entire payment is forfeited.*

*You have one month to complete the test sheet from the date specified. The test sheet may be mailed, faxed or e-mailed to us.*

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