Lake Norman Dental Assisting School North Carolina Dental Radiology Course

Registration form **Fax form to: 704-663-5327**

**Name	Date
**Birth Date	
Address	StateZip
**E-Mail address	
Applicant's cell	
**Employer	
Address	StateZip
Business phone	fax
**Date you plan to attend course:	
Course Includes:	
7 hours of instruction in the health, safety, product	ion, and use of dental radiographs
7 hours of clinical instruction (taking and developing	ng of radiographs)
North Carolina State Board of Dental Examiners ap	proved Dental Radiology exam.
Certificate of achievement will be awarded to those radiology exam.	e who attend all 14 hours of instruction and pass the
**Cost of course: \$600.00	
We require a \$300.00 deposit to hold your place in	course
Course hours: 9:00am – 5:00pm with an hour lunch	n both days.

See our website for specific dates: www.ncdentalassisting.com ****CoursesSchedule

Cancellation, refund, and requirements policy:

A full refund of all monies will be made to any applicant who cancels the enrollment agreement within THREE business days of the first class. All applicants must have at least one year of experience in clinical applications (DA1) all DA2 and CDA welcome