



Founded in 1937

We Cordially Invite You and Your Team to Join Us!

52nd Annual Dr. James E. Carter Jr. Fall Meeting

September 13-14 2024

Augusta Marriott at the Convention Center

2 10th Street

Augusta, GA 30901

Name _____ Cell # _____

Address _____ City _____ State _____ Zip _____

E-mail _____ Graduation Year _____

EARLY REGISTRATION (Check all that apply)

Dentist \$250 _____

SNDA members \$49 _____ Staff (Non-expanded duties) \$99 x _____ = _____
(List names of staff at bottom of page)

Expanded Duties \$ ___ x _____ = _____

LATE REGISTRATION AFTER September 6, 2024

Dentist \$300 _____

SNDA members \$69 _____ Staff (Non-expanded duties) \$125 x _____ = _____
(list names of staff at bottom of page)

Expanded Duties \$ ___ x _____ = _____

Amount Enclosed \$ _____

Registration includes: All Courses.

PAYMENT OPTIONS

Make Checks payable to:

Georgia Dental Society
PO Box 875 Jonesboro, Georgia 30237

PayPal: Go to georgiadentalsociety.com

Please list registration type (i.e. Dentist, or staff) in memo line.

To pay via **Zelle:** use contact # 404-823-3882

Write "Fall Meeting" in the message area

Return registration forms via email to: drgodbee@gmail.com

For additional information and questions, please contact Dr. Elaine Godbee Lett @ drgodbee@gmail.com or Dr. James Barron @ 404-606-0588

Call Augusta Marriott at 706-722-8900 to reserve rooms. Be sure to mention Georgia Dental Society when booking.

Staff Attendees:

- 1) _____ :
- 2) _____
- 3) _____
- 4) _____
- 5) _____



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EXPANDED DUTIES REGISTRATION:

For Multiple Registrants Copy This Form and Submit One Form for Each Assistant

Dentist (Office) _____
Office Address _____
City _____ State _____ Zip _____ Phone _____
Dental Assistant _____ Email Address _____

CPR CERTIFICATION MUST BE CURRENT PRIOR TO THE COURSE

Courses V & VI - September 13, 2024
Friday - 8:00 a.m. – 5:00 p.m.

Course IV - September 14, 2024
Saturday - 8:00 a.m. – 5:00 p.m.

COURSE V	COURSE VI	COURSE IV
* Periodontal Pack Placement	* Sealants	* Bruxism Appliances
* Desensitizing Agents	* Fluoride Application	* Denture Repair Impression
* Bases and Liners	* Nitrous Oxide Monitoring	* Face Bow Registration
* Dentin Bonding	* Dry Socket	* Tissue Retraction
* In-Office Bleaching		* Temporary Crowns

	<u>GDS Members</u>	<u>Non-Members</u>
Courses V & VI	_____ @ \$250 _____	_____ @ \$325 _____
Course IV	_____ @ \$225 _____	_____ @ \$300 _____
Courses IV, V, VI	_____ @ \$400 _____	_____ @ \$500 _____
TOTAL	\$ _____	\$ _____

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PO Box 875 Jonesboro, Georgia 30237

For PayPal: Go to georgiadentalsociety.com
Click Visa/Master card logo / List Expanded Duties in
registration description Memo Line

To pay via Zelle: use contact #
404-823-3882
Write "Fall Meeting" in the
message area

Return registration forms that include expanded duties via email to:
svaughndmd@gmail.com

*For additional information and questions please contact:
Dr. Sharcola Vaughn (770) 506-9818 Fax: (770) 506-9812
Note: All registration forms must be received by September 6, 2024.
Absolutely no on-site registration or refunds.*

"PROGRESSING THROUGH DIVERSITY.....EXCELLING THROUGH UNITY"