Central California Dental Academy

Registration Form

Course Date

Student Name

Phone #

Email Address

Address

How did you hear about us?

Payment Policy

Your payment is due (2) weeks prior to your scheduled course. A $50.00 fee will be applied for returned checks. Payments are nonrefundable. If you fail any portion of the exam you will have to retake the course for an additional fee. If you no show, you will forfeit your payment.

If you have any questions please call **(661) 372-0175**.

Please make check payable to:
Central California Dental Academy

Mail your payment to:
Central California Dental Academy
P.O. Box 5793
Bakersfield, CA 93388