

**Friday 7 November 2025**

Hanger Farm, Alkman Lane, Southampton SO40 8FT

**Return to:** [branchsectionevents@bda.org](mailto:branchsectionevents@bda.org)**Delegate 1** (please use next page if booking for more than one person):

Title:	First name:	Surname:
BDA membership number (if applicable):		GDC number (if applicable):
Job title:		Practice / Organisation (if work address provided):
Address:		
Postcode:		Tel:
Email:		
Any special requirements including disabled facilities etc:		

**I would like to register for Friday 7 November 2025** (our ref: BS1179)

- ☐ BDA member: £30  
☐ Non-member dentist: £50  
☐ Dental care professional: £15  
☐ Undergraduate student / FD/VT: £15

**We require a unique email address for every person booked so that we can send confirmations and CPD certificates directly to each attendee.****Payment** (please note that registrations will not be processed without payment)**Credit / debit card for £** \_\_\_\_\_ ☐ **Visa** debit/credit ☐ **Mastercard** debit/credit

Card number: \_\_\_\_\_

Expiry date: \_\_\_\_\_ Security number\* (3 digits on reverse of card): \_\_\_\_\_

Name of cardholder: \_\_\_\_\_ Signature of cardholder: \_\_\_\_\_

\* For data security, if booking using this form, please send a separate email with your 3 digit security number on the reverse of your card to [branchsectionevents@bda.org](mailto:branchsectionevents@bda.org) or call us with this number on 020 7563 4590 - we cannot process your booking without it.

**Stay in touch**

The BDA will hold your personal data on its computer database and process it in accordance with the Data Protection Act. Further details at: [bda.org/legal/privacy-policy](http://bda.org/legal/privacy-policy)

**IMPORTANT: To keep in contact after the event, please let us know what you wish to receive correspondence about:**

(If you currently receive any of the following and want to continue, please also tick "yes")

**National and local events****Offers and services****Approved partners and suppliers**Email: Yes ☐ No ☐ Post: Yes ☐ No ☐ Email: Yes ☐ No ☐ Post: Yes ☐ No ☐ Email: Yes ☐ No ☐ Post: Yes ☐ No ☐I understand that I will be able to opt out from receiving these BDA communications at any time. Email [mydetails@bda.org](mailto:mydetails@bda.org)

## Wessex Branch

### Tooth wear and the application of contemporary occlusal principles in restorative management

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#### Delegate 2:

Title:	First name:	Surname:
BDA membership number <i>(if applicable)</i> :		GDC number <i>(if applicable)</i> :
Job title:		Practice / Organisation <i>(if work address provided)</i> :
Address:		
Postcode:		Tel:
Email:		
Any special requirements including disabled facilities etc:		

#### Delegate 3:

Title:	First name:	Surname:
BDA membership number <i>(if applicable)</i> :		GDC number <i>(if applicable)</i> :
Job title:		Practice / Organisation <i>(if work address provided)</i> :
Address:		
Postcode:		Tel:
Email:		
Any special requirements including disabled facilities etc:		

#### Delegate 4:

Title:	First name:	Surname:
BDA membership number <i>(if applicable)</i> :		GDC number <i>(if applicable)</i> :
Job title:		Practice / Organisation <i>(if work address provided)</i> :
Address:		
Postcode:		Tel:
Email:		
Any special requirements including disabled facilities etc:		