



## The Australasian College of Cosmetic Surgery

*Raising Standards, Protecting Patients*

### ACCS Dermal Fillers Workshop 17-19 August 2007 Double Bay NSW

The ACCS Dermal Fillers Workshop is an educational initiative of the Australasian College of Cosmetic Surgery designed for doctors working to enhance their skills in Cosmetic Medicine.

#### Course Content

- Introduction to Cosmetic Medicine
- Facial Anatomy-The Ageing Face
- Blocking & anesthesia
- Overview of Hyaluronic Acids
- CPM Technology
- Basic injection techniques
  - lips
  - nasolabial folds
  - marionette lines
  - perioral lines
  - glabella

#### Venue

**The Knudsen Clinic**  
Level 6  
45A Bay Street  
Double Bay

#### Registration Fee

\$1980 Per participant ( GST Inclusive )  
Registration forms can be downloaded from  
the ACCS Website or by calling  
1800 804 781 or email [admin@accs.org.au](mailto:admin@accs.org.au)

Morning, afternoon tea and lunch included in registration fee.



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ACCS Dermal Fillers Workshop - Double Bay NSW  
17 – 19 August 2007

## REGISTRATION FORM

PARTICIPANT INFORMATION

DATE OF APPLICATION: \_\_\_\_\_

Name:

\_\_\_\_\_ Last

\_\_\_\_\_ First

Address: \_\_\_\_\_

Alternate Address: \_\_\_\_\_

Contact Information:

(      )

\_\_\_\_\_ Home Telephone

\_\_\_\_\_ Mobile

Email \_\_\_\_\_

Post Or Fax Form to:

Australasian College of Cosmetic Surgery  
PO Box 36 Parramatta NSW 2124  
Fax: (02) 9687 1799

Payment Details:

\$1980 Per participant. (GST Inclusive)

Payment is required at time of registration. No payments/registrations taken on the day.

Cheque Payable to Australasian College of Cosmetic Surgery

Money Order As for cheque

Credit Card Mastercard/Visa/Amex/Diners (please circle)

By fax: (02) 9687 1799

By phone: 1800 804 781 (free call)

Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_

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

NB: The amount of \$1980 being full payment for the course will be debited to your card.

Office Use Only: Payment Confirmed: Yes /No Receipt # \_\_\_\_\_ Date: \_\_\_\_\_