

General Information: Please check all that apply :

New Member Renewal of Current Membership
 Reactivation of Expired Membership (Last year current) _____

CDA RDH EFDA

EFDA Student Educator Dentist

Other _____

Yes, I am a Registered EFDA in the State of Ohio
Registration Number: _____

I would like more information about obtaining
Ohio EFDA Registration.

I prefer to receive my ODEFA Newsletter and Latest Updates
via: E-mail US Postal Mail

Active Membership Fee: \$50.00

Student Membership Fee: \$25.00

(Add an additional \$15.00 to all applications received after June 1st.)

Credit Card Payments

Full Name on Card _____

Payment Amount _____ Circle: Visa/MasterCard/Discover

Card # _____

Card Expiration Date(xx/xxxx) _____

Your Signature _____

Date: _____

Make Checks payable to: ODEFA.

Mail Application to: 4619 Hickory Ridge Ave. Brunswick, OH 44212

Membership Information:

Active Membership

Expanded Functions Dental Auxiliary (EFDA) who has
successfully passed the State Board designated examination for
Expanded Functions in Ohio.

Graduate of which Expanded Functions Training Facility:

Student Membership

Those who are presently enrolled in an Expanded Functions
Training Program.

Name of the institution currently attending:

ODEFA
Ohio Dental Expanded
Functions Association
4619 Hickory Ridge Ave.
Brunswick, OH 44212

ODEFA

Ohio Dental Expanded Functions Association

The Ohio Dental Expanded Functions Association is a professional organization for EFDAs in Ohio. Organized in 1978, it is the first EFDA association in the United States. Currently ODEFA represents and provides services to approximately 300 members.



Read inside to learn about the benefits of becoming an ODEFA member! Be sure to fill out the enclosed application for membership.

***Excellence is not a destination
but a continuous journey***

ODEFA.org

About ODEFA

ODEFA Mission

We as EFDAs defend the trust bestowed upon us by those we serve. Knowledge, compassion, professionalism and competence are the keys to ensure that trust is well placed. We hold ourselves morally, ethically, and clinically accountable for our actions. Our mission is to offer the best of ourselves for the good of our patients.

Goals

ODEFA's primary goal is to provide an organization that will increase dental and public awareness of expanded functions. ODEFA aids in the stability of the profession by providing a voice in the political process. Educational opportunities are also offered for the membership's benefit.

Organizational Structure

The state board consists of officers and committee chairs. Local components follow the same structure. All state and local business is governed by ODEFA's Charter and Bylaws. A board of advising dentists exists as counsel.

ODEFA ADVISORY BOARD MEMBERS

Northwest

Dr. James Kwasniak
Dr. Keith Norwalk
Dr. Joseph Schmidbauer

Central West

Dr. Clark Sanders
Dr. Joan Salido

Northeast

Dr. Ronald Occhionero
Dr. Ronald Arndt

South West

Dr. Burton Saidel

Honorary Advisory Board Member

Dr. Dennis Tommasone,
Northeast

Central East

Dr. Joseph Alvarez

Local Components

The Membership Component boundaries are designated by six geographic regions throughout the state of Ohio.

The Components are: Northwest, Northeast, Central West, Central East, Southwest and Southeast. When your completed membership application is received, your component will be determined by either where you reside or your location of employment. Your name will be given to the proper local component Trustee. You may be contacted by your Trustee in advance about future meetings and continuing education seminars in your area. Contact information for all current Trustees can be found on the ODEFA website at www.odefa.org or on the back cover of the ODEFA Newsletter.

What ODEFA Membership Provides

ODEFA members have the honor of belonging to one of only a few organizations for EFDAs in the United States! ODEFA State Board members are always working to continue to provide the membership with new perks. Besides giving members a voice in the association, we currently offer many benefits.

Membership Benefits Include:

- Notification and special rates on continuing education courses and other events
- Updates about the ever-changing state laws, duties and professional concerns
- Subscription to ODEFA's The Expanded Newsletter
- Discounts on Avis, Choice Hotels
- Mentoring service for practicing EFDAs and EFDA students
- Employment placement services
- Salary survey
- \$100 Yearly Tommasone Award for outstanding achievements
- EFDA Registration assistance
- \$1000 Yearly Student Scholarship opportunity
- 20% discount on continuing education offered by Case Western Reserve University



By becoming an ODEFA Member you will be contributing to the advancement of our profession!!

ODEFA.org



ODEFA

Ohio Dental Expanded Functions Association

How Do I Join?

To join or renew your membership, please fill out both sides of this application and enclose dues.

Membership: \$50

Student Membership: \$25

Personal Information:

Name _____

Address _____

City _____ State ____ Zip _____

County _____

Home Phone (____) _____

Mobile Phone (____) _____

Email Address _____

(For internal use only. Must be included to receive ODEFA newsletter and other news)

Birthdate _____

Social Security Number: *(last four digits only)* _____

Employment Information:

Employer's Name _____

Employer's Address _____

Work Phone (____) _____

City _____ State ____ Zip _____

County _____

continued on reverse side