



MANITOBA DENTAL ASSOCIATION

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DECLARATION OF COMMITMENT TO ETHICAL PRACTICE AND THE PUBLIC INTEREST

I, _____, solemnly declare that,
Name of Member (please print)

first and foremost, I shall protect the interests of my patients and the public in my practice of dental assisting in the Province.

I solemnly declare that I shall comply with the terms of my licensure and cooperate with the Manitoba Dental Association.

I solemnly declare that I shall uphold the honour and dignity of the profession in the conduct of my practice of dental assisting and personal life.

I am aware of *The Dental Association Act (The Act)* and the Manitoba Dental Association Bylaws and do solemnly declare that I shall adhere to *The Act* and Bylaws.

DECLARED and SIGNED in the offices of the Manitoba Dental Association at Winnipeg,
in the Province of Manitoba this _____ day of _____ 20____.

Member

MDA Personnel