

Main P.O. Box 4437, Vancouver, BC V6B 1Z3 www.ccdsbc.ca Tel: (604) 618-8856 Fax: (604) 728-8805 E-mail: ccdsbc@canada.com

Dear Colleagues and Friends of CCDSBC,

The Chinese Canadian Dental Society of BC would like to invite you to join us in celebrating our 19th Annual Gala Extravaganza Dinner on **Saturday, June 16** at the elegant **Hyatt Regency Hotel** in downtown Vancouver.

This year's festivities will be special as we are honouring **Dr. Edwin Yen**, who has served as the Dean of the UBC Faculty of Dentistry for the last 13 years. His leadership and vision have taken UBC Dentistry to a new level of excellence with the opening of the new Nobel Biocare Oral Health Centre. We will also take this opportunity to introduce the new Dean, **Dr. Charles Shuler.**

Our theme for the Gala is "Hawaiian Paradise". In addition to a distinct menu customized for the evening, we will be entertained by the world famous Paul Latta Polynesian Dancers. Although Black-Tie is optional, casual Hawaiian attire is encouraged with a prize going for the best dressed Polynesian. Bring your cameras!

As usual we will have lots of door prizes, live and silent auctions. The grand door prize is two return airline tickets to Las Vegas. During the reception **Mercedes-Benz** of West Broadway will be showcasing their latest models.

Hope you will join us for this memorable event,

Anthony Li
Anthony S.K. Li
CCDSBC Gala Chair

Carter Ng
Carter Ng
CCDSBC President





For ticket information go to www.ccdsbc.ca or phone Dr. Anthony Li 604 437 4427 during office hours: Tues-Fri 9am-5pm, email: tonyli@shaw.ca

Ticket Order Form

CCDSBC Gala Extravaganza

Saturday June 16, 2007 5:30 pm Registration Hyatt Regency Hotel 6:00 pm Reception -Hors-D'Oeuvres 655 Burrard Street, Vancouver, BC 7:00 pm Dinner and Show Tickets are \$120 each (includes GST) Table of 10 Seats No. of tickets required X \$120 = \$Mail Tickets to: Last Name First Name Address City Province Postal Code Phone No. Fax No. Email Address Method of Payment Cheque Payable to CCDSBC Visa Visa Card No. Exp. Date Visa Cardholder Name Signature To expedite sitting, please provide names of all guests

Send completed form and payment to CCDSBC c/o Dr. Anthony Li $\,$ 201-5066 Kingsway $\,$ Burnaby, BC $\,$ V5H 2E7 $\,$

Fax: 604 298 1095

Email: tonyli@shaw.ca or ccdsbc@canada.com