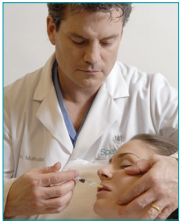


Get The Point™

Basic to Advanced Injectable Webinars

A CME ACCREDITED EVENT! REGISTER TODAY!



Dr. Stephen Mulholland, **ThreadLift™**, **FotoFacial®**, **LipoLite™** and **VolumaLift™** developer and board certified plastic surgeon invites you to attend an Advanced Course in Injectable Aesthetic Therapy, “**Get the Point™**”, teaching both basic and advanced Botox® injectable filler techniques.

WHAT YOU WILL LEARN:

- 1. Botox®**
 - Basic science and physiology
 - Basic and Advanced Botox® techniques of the brow, midface, perioral and neck
- 2. DermaFirm™**
 - Dr. Mulholland's proprietary Botox® for Skin Care, firming and tightening.
 - Learn the art and science of skin tightening and firming using Botox®, WITHOUT affecting mimetic motion
 - Learn the art and science of up selling your traditional Botox® clients
- 3. Injectable Fillers**
 - Basic science and physiology of Hyaluronic acids and Artefill
 - Basic and Advanced HA and Artefill injection techniques of perioral and lips
 - Learn the art and science of up selling your traditional Restylane® clients
- 4. VolumaLift™**
 - Basic science and physiology of volume injecting facelift, including the **5 Minute Nose Job™**
 - As seen on the TODAY Show - 30 minute volumization

WHAT YOU GET:

- VolumaLift™ and DermaFirm™ certification
- Access to Dr. Mulholland's exclusive online aesthetic physician advanced training site: www.MulhollandMD.com
- Access to marketing brochures and patient marketing materials
- www.MulhollandMD.com website based support and archived digital procedure support and review materials
- Web-based manual access and support
- Listing on Volumalift.com & 5MinuteNoseJob.com websites

Tuition: The cost of the “Get the Point” injectable workshop is \$1500.00 (USD) and is open to physicians, nurses, (RN, RNP, RNA) PAs, and injectable aestheticians.

CME Credits: 15 hrs of level one AMA credits

TO REGISTER PLEASE FAX TO **416-642-1204** OR CALL **JINA KIM** AT **416-642-1300 X403** WITH ANY QUESTIONS.

Name: _____

Specialty: _____

Facility Name: _____

Business Address: _____

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Email: _____

Credit Card: _____
VISA, AMEX OR MASTERCARD ONLY

Expiry Date: _____

Signature: _____

If billing address is different from above address, please supply:

