



**TO:** The Profitable Dentist Buying Club

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**FAX:** 1 (812) 949 – 8535

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**PHONE:** 1 (800) 683 – 4723

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Full Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

State License #: \_\_\_\_\_

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_