

ENROLLMENT FORM



YOUR ANNUAL MEMBERSHIP INCLUDES ALL THIS:

- This is a truly hands-off program for you as the owner/doctor. Your dental assistants will gain valuable knowledge and training that will increase their abilities and help grow and develop your practice.
- Dental assistant training modules will increase the efficiency and effectiveness of assistants both clinically and non clinically (communication skills, treatment presentations, etc.)
- All pediatric dental assistant training modules are available online with 24/7 instant access.
- The PDAA newsletters are a part of the annual membership, both mailed and available online, for your convenience.
- Ongoing training and support through additional online video training modules is available to maximize your dental assistant's value to the practice.
- Personalized help when you need it via email support from Dr. Rhea Haugseth.

A single, flat rate for the entire office!
Only \$595/yr

Doctor's Full Name: _____

Practice Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Payment Method: Visa MC Amex Discover Check

Card Number: _____

Expiration: _____ Security Code: _____ Billing Zip: _____

Signature: _____

Date: _____

YOUR SIGNATURE INDICATES YOUR AGREEMENT TO THE TERMS WITHIN YOUR CREDIT CARD ISSUER'S AGREEMENT. ONCE PAYMENT IS RECEIVED, ADDITIONAL INFORMATION AND ENROLLMENT FORM FOR DENTAL ASSISTANTS WILL BE SENT TO YOU VIA EMAIL PROVIDED TO COMPLETE THE REGISTRATION PROCESS. COMPLETING AND RETURNING THIS FORM CONSTITUTES A FINANCIALLY BINDING AGREEMENT BETWEEN THE DOCTOR AND THE PEDIATRIC DENTAL ASSISTANT ASSOCIATION. IT ALSO CONSTITUTES PERMISSION FOR DR. RHEA HAUGSETH AND THE PEDIATRIC DENTAL ASSISTANT ASSOCIATION TO COMMUNICATE WITH YOU ABOUT PAYMENTS, EVENTS, AND OTHER OFFERS.