



## Synergy Dental Partners, Inc.

On behalf of all of us at Synergy Dental Partners, we would like to say welcome to our firm. Membership is completely **FREE** and allows your dental office to realize the benefits of group purchasing immediately. As a member of Synergy, your office will benefit from cost saving agreements made between Synergy and respective distributors and vendors.

### Synergy Dental Application Process:

Please fill out the form and the information below and fax to (888) 487-9791 or e-mail to [sales@thesynergydentalpartners.com](mailto:sales@thesynergydentalpartners.com) or complete an on line application at <http://www.thesynergydentalpartners.com/contact-us.html> so that we can start achieving savings for your office immediately.

### Synergy Dental Pricing Process:

Please Fax or e-mail 3-4 recent (last 60-90 days) dental invoices from the local supplier to 888-487-9791 or [sales@thesynergydentalpartners.com](mailto:sales@thesynergydentalpartners.com)

## Membership Information Form

Name of Dental Office:		
Office Address:		
City:	State:	ZIP Code:
Primary Contact Name:		Phone:
Primary Contact E-mail Address:		
Secondary Contact Name:		Phone:
Secondary Contact E-mail Address:		
Fax Number:	License Number:	
Are you currently a customer of Darby Dental?		
If yes, what is your account number?		
I have read the disclosure agreement	<input type="checkbox"/>	

**Synergy will also need proof of a Dental license with the submission of your membership form**

If you have any questions or need additional information please feel free to call (888) 810-2995 or reach out to the contact below:

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