



## Dental Genius Forms Manual

Doctor's Name(s): \_\_\_\_\_

Practice Name: \_\_\_\_\_

Office Phone #: (\_\_\_\_) \_\_\_\_\_ Fax #: \_\_\_\_\_

Email address: \_\_\_\_\_

**\$189** – This ringed binder includes every form we give our coaching clients (including our own annual appraisal, verbal and written warning documentation, hiring documents, letters and more), and is available for purchase for \$189. We use the binder format so you can make unlimited copies of each form and keep a clean original.

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**Please circle one:**

Visa      MasterCard      American Express      Discover

Card # \_\_\_\_\_ Exp. \_\_\_\_\_

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Name as it appears on card: \_\_\_\_\_

Doctor signature: \_\_\_\_\_

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