

Dansie Orthodontics Sponsorship Program



*Type or Print all legibly

*Do not write on the back of the application

Date: _____

Requesting Agency/Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Make Check Payable to: _____

How did you hear about the Dansie Orthodontics Sponsorship Program?

Tell us about your program (please attach any pertinent program information, flyers, etc.) Please explain the impact this sponsorship will have.

Please send all requests to:

Dansie Orthodontics

Attn: Sponsorship Coordinator

11996 S Anthem Park Blvd, Ste 100

Herriman, UT 84096

or email to smile@dansieorthodontics.com

***Sponsorships are based on available funds set aside to help make an impact in the community. Approval is based on available funds at the time of application.**