TeethFirst! Materials Order Form

Please Print Clearly:

Name: _______________________________________________________________
Role/Title: ____________________________________________________________
Practice/Org.: ________________________________________________________
Address: ______________________________________________________________
City, State, Zip: ________________________________________________________
Phone: _________________________________________________________________
Email: _________________________________________________________________

Return this order form via:
Email: info@TeethFirstRI.org
Fax: (401) 351-1758
Mail: TeethFirst!
c/o Rhode Island KIDS COUNT
One Union Station
Providence, RI 02903

Questions? Call (401) 351-9400 or email us at info@TeethFirstRI.org

TeethFirst! Flip Book for Dental Providers*
(while supplies last)
• 8” x 8”
• Laminated
• Full Color
• 13 Double Sided Pages
• Bilingual (English/Spanish)
• Free
# of Flip Books: _____

TeethFirst! Infant Toothbrushes
(while supplies last)
• 5.5”
• Assorted Colors
• TeethFirst! Logo
• Individually packaged
• Free
# of Toothbrushes: _____

TeethFirst! Brochures
• 8.5” x 14”
• Quad Fold
• Full Color
• Bilingual (English/Spanish)
• Free
First Dental Visits
# of Brochures: _____

TeethFirst! Brochures
• 8.5” x 14”
• Quad Fold
• Full Color
• Bilingual (English/Spanish)
• Free
Healthy Teeth for You and Your Baby
# of Brochures: _____

*The Flip Book is for Dental Providers to use chair-side as a patient education tool (it is not for patients to take home)