



# Arkansas State Dental Association Disaster Relief

## *Initial Contact Form*

This form is made available to dentists in Arkansas who have experienced damage to their practices or residences as a result of extreme weather events such as tornadoes, thunderstorms or floods. Please complete the information and email to [gorma@arkansasdentistry.org](mailto:gorma@arkansasdentistry.org) or fax to 501-834-7657. A member of the ASDA team will contact you to determine next steps in the process. Funds available through this program are intended to meet basic needs during the recovery process.

DENTIST'S NAME: \_\_\_\_\_

ADDRESS WHERE DAMAGE OCCURRED: \_\_\_\_\_

\_\_\_\_\_ ZIP CODE: \_\_\_\_\_

THIS ADDRESS IS MY  HOME  OFFICE

DENTIST'S PHONE \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

GENERAL DESCRIPTION OF DAMAGE:

---

---

---

---

---

---

---

---

---

---

*For more information, call (501) 794-9766 or (251) 294-2488*