



Georgia Board of Dentistry

2 MLK Jr. Drive, SE, 11th Floor

East Tower

Atlanta, GA 30334

(404) 651-8000

www.gbd.georgia.gov

Decorative Wall Certificate Order Form

- ❖ Complete print/type form below – your name will be printed on the wall certificate the same as on your pocket-card license.
- ❖ Submit this form with the appropriate fee by personal check, money order or cashier's check made payable to the Georgia Board of Dentistry.

Dentist - \$50

Dental Hygienist - \$25

- ❖ **Please do not submit this form and check until you are in receipt of your license.**

Name: _____

Mailing Address: _____

(City)

(State)

(Zip)

Daytime Telephone #: _____

License #: _____

Return this completed form with the required fee to:

GEORGIA BOARD OF DENTISTRY

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Please allow six (6) weeks for delivery.