



Delta Dental of Virginia  
4818 Starkey Road  
Roanoke, VA 24018  
888.335.8296

Date: \_\_\_\_\_

### GROUP REQUEST FORM

Group Name: The Local Choice

Group Number: 047000000 & 048000000 Telephone Number: \_\_\_\_\_

Group Administrator: \_\_\_\_\_

Group Address: \_\_\_\_\_

\_\_\_\_\_

Mail to (If Different from Above): \_\_\_\_\_

\_\_\_\_\_

#### Quantity Needed

\_\_\_\_\_ Benefits Brochure

#### Delta Dental of Virginia Use Only

Date Received: \_\_\_\_\_

Date Completed: \_\_\_\_\_

Sign off: \_\_\_\_\_

Method Sent: Next Day Air \_\_\_\_\_ 2nd Day Air \_\_\_\_\_ UPS Ground \_\_\_\_\_ Regular Mail \_\_\_\_\_

Please send request to:

**Delta Dental of Virginia**

Attn: Marketing Administration

4818 Starkey Road, Roanoke, VA 24018

Fax to 540-774-7574

Email to [MktgAdmin@deltadentalva.com](mailto:MktgAdmin@deltadentalva.com)

If you have questions or need additional information please contact Allison Gaines at:

804.915.2690 or [allison.gaines@deltadentalva.com](mailto:allison.gaines@deltadentalva.com)