



Staples Online Purchasing Registration Form for MDA Members
Please complete and return this form to order online at
www.StaplesLink.com

Please fax your completed form to Staples at: (248) 465-1527

Please complete for the person who will be doing the online ordering for your office. If more than one person will be using StaplesLink, please complete a separate form for each person.
PLEASE TYPE OR PRINT LEGIBLY.

StaplesLink User Information:

Dental Office/Shipping Location Name: _____

City, State, Zip: _____

First Name: _____ Last Name: _____

E-mail Address: _____

Phone: () _____ Fax: () _____

Your company login ID for the MDA account is: 1025628DET

You will receive your individual user ID and password by e-mail.

\$50 minimum order, place orders by major credit card

Thank you again for joining the Staples-MDA program!

For questions or assistance please contact:

Ken Caeti, Account Manager
Staples Business Advantage
1-800-693-9900, ext. 322
Kenneth.caeti@staples.com