OLIVER FAMILY DENTISTRY DENTAL SAVINGS PLAN APPLICATION

Effective Date:			
Last Name:		First Name	MI
Home Address		Date of Birth	
City		State	Zip
Covered Plan Member	·'S:		
Name	Birth Date	Relationship	Cost per Member
		(A)Member	
		(B)	
		(C)	
		(D)	
☐ Care Cro fee will	edit (12 monthly par be applied if using (yments upon approval). An a	Exp Date CVCadditional 13% administrative erstand the plan details and
Signature Date			Date
increases. I authorize Oliver Family automatically renew my the plan is renewed for notify Oliver Family Der Signature	y Dentistry to charge y enrollment in the o my records*. If I ch ntistry one month pr	e my credit card each year up discount plan. Oliver Family noose to discontinue participa rior to my anniversary renew Date	Dentistry will notify me when ating in the discount plan, I will
(signature of plan holder)			

^{*}Annual fee required at enrollment and is non-refundable. OFD reserves the right to modify, change, or discontinue the OFD Dental Plan, fees, terms, and services at the company's option upon written notice from OFD prior to your anniversary renewal date.

Oliver Family Dentistry's

Dental Savings Plan

We have noticed lately in our practice that many local families cannot afford dental insurance or dental check-ups for their families. This made us think that there has to be a way for us to offer patients with NO dental insurance, a way to save money while still getting excellent dental care. For this reason, we have created the Dental Savings Plan. With this plan there are no deductibles, no yearly maximums, and no waiting periods to begin treatment.

We now offer two plans

Traditional Plan includes:

- -2 preventative visits per membership year, each visit includes
 - -a simple teeth cleaning
 - -a Doctor Exam
 - a Fluoride application
- -1 set of necessary X-rays per membership year
- -15% Discount on ALL in office Dental procedures and products

ANNUAL DENTAL SAVINGS PLAN - ONLY \$297

Care Credit Card Users:

If the dental savings plan is paid for with a Care Credit Card, there will be an additional 13% administration fee applied

As you can see, the Dental Savings Plan will save each member of your family more than \$50 a year! PLUS Each Dental Savings Plan member will also save 15% on ALL in office dental procedures and products.

Here are a few samples of discounted services:

-Sealants

-Fillings

-Crowns

-Extractions

-Teeth Whitening

-Bridges

-Dentures

-Partials

-6 Month Smile

-Clear Correct

DENTAL SAVINGS PLAN GUIDELINES

- -family members eligible for savings plan include spouse, and dependent children under the age of 26.
- -all savings plan membership fees are due and payable in full at the time of registration.
- -all savings plan membership fees are NON-REFUNDABLE.
- -all additional charges are due day of service.
- -savings plan duration is for one full year, starting on the registration date.
- -savings plan coverage expires at the end of the membership year.

DENTAL SAVINGS PLAN EXCLUSIONS AND LIMITATIONS

- -savings plan members cannot use any other dental coverage with this plan.
- -the savings plan will not cover any portion of a specialist referral.
- -the savings plan will not apply to costs of dental care for injuries covered under workman's compensation.
- -the savings plan will not apply to dental care for which, in the sole opinion of the treating dentist or doctor, lies outside the realm of their capability.
- -the savings plan will not apply to hospitalization or hospital charges of any kind.
- -the savings plan will not apply to costs of dental care which is covered under automobile medical.
- -covered benefits of the savings plan are available only at Oliver Family Dentistry (2621 New Walkertown Road Winston Salem, NC 27101)

This is a dental savings plan, not a dental insurance plan*