

APPLICATION FORM

First Name _____

Last Name _____

Date of Birth _____

Address _____

Mobile _____

Home Phone _____

Complete Plan **\$278.00**

Periodontal Plan **\$389.00**

Cash (In office only)

Credit card information must be provided even if paying with cash!

Credit Card _____

Exp. Date _____ CVC _____

I _____

Authorize Confident Smile Dental PC to charge my credit card for the Membership.

Check Yes or No for Auto Renewal by card on file:

Yes No

Your Signature _____

Completed by Confident Smile Dental

Date Received _____

Date Approved _____



Confident Smile Dental

CONFIDENCE COMES WITH A GREAT SMILE!

**JOIN OUR
IN-HOUSE DENTAL
BENEFITS MEMBERSHIP
PLANS**

(516) 564-9444

www.csdentalny.com

**543A Hempstead Turnpike
West Hempstead, NY 11552**



IN-HOUSE DENTAL BENEFITS MEMBERSHIP PLANS

***NO DENTAL INSURANCE?
NO PROBLEM!***

Our practice offers In-House Dental Benefits Membership Plans to patients currently not covered by dental insurances. These affordable saving plans are simple. Patients pay an annual subscription directly to our office for preventative care and discounts for other treatments.

***GET THE HIGH QUALITY
DENTAL CARE YOU EXPECT
AND SAVE MONEY!***

COMPLETE PLAN for \$278/year/ person includes:

- 2 Cleanings (non-periodontal based)
- 2 Periodic Exams
- All Necessary X-rays
- 1 Emergency Exam
- 2 Fluoride Treatments for Children (under 14 years old)
- 10% Off Additional Dental Treatments (Implants, Arestin NOT included)
- 10% Off Teeth Whitening

PERIODONTAL PLAN for patients with periodontal (gum) disease for \$389/year/person includes:

- 3 Periodontal Maintenance Cleanings
- 2 Periodic Exams
- All Necessary X-rays
- 1 Emergency Exam
- 20% Off Scaling and Root Planing (Deep Cleaning)
- 10% Off Additional Treatments (Implants NOT included)
- 10% Off Teeth Whitening

- Membership enrollment fees must be PAID prior to any dental care procedures.
- If the participant does not utilize their savings plan benefits, the plan is NON-REFUNDABLE and offers no additional discounts. Benefits cannot be carried over to another year.
- Membership is for one year beginning on the enrollment date.
- Membership is automatically renewed on the anniversary date unless a written request to cancel is received **14 days** prior to the renewal. A reminder of the renewal date will be sent 30 days prior to renewal.
- Payment for additional dental services is the member's responsibility. Payment is due on the date of service to qualify for the discounts.
- It is the member's responsibility to schedule and keep all appointments offered as part of the Dental Membership Plan. Please notify the office at least 48 hour in advance if you must change an appointment in order to avoid missed appointment fees.
- There will be a **\$50 reinstatement fee** if your plan lapses.