

DDA SAVINGS PLAN ENROLLMENT FORM

First Name: _____ Last Name: _____ MI: _____
Street Address: _____ City: _____ State: _____ Zip: _____
Home/Cell Phone: _____ Work Phone: _____
Email: _____ Birthdate: _____

Additional Members:

Name	Birthdate	Relationship

Annual fee options: \$325 single member \$305 spouse \$230 per child

Payment method to be kept on file:

Card Type (circle one): VISA MASTERCARD

Card Number: _____

Expiration Date: _____

Security Code: _____

Membership Benefits

- 2 exams per year
- 2 standard cleanings
- 1 Emergency exam per year
- 2 Fluoride treatments per year
- 2 Oral cancer screenings per year
- All diagnostic xrays
- 15% OFF Additional cleanings, sealants, fillings, core buildups, night guards, oral surgery, Crowns, veneers, root canal therapy, periodontics, dentures, partials, implants
- \$500 OFF Invisalign
- \$250 Teeth Whitening

Dental Savings Plan Guidelines

- Patient's portion of bill is due the day of service
- Savings plan expires 12 months after sign-up date. *You may elect to enroll in auto-renewal and save 5% off next year's premium*
- Exams, cleanings, and bitewing xrays must occur within the year of enrollment and cannot be carried over to the next year.
- It is the patient's responsibility to make and keep appointments for his/her family. A \$50 broken appointment fee will incur for each broken appointment without a 24-hour advance notice.
- Cannot be used in conjunction with another dental plan including financing options such as Care Credit.
- Membership fees are non-refundable

Exclusions & Limitations

This program is a discount plan, not a dental insurance plan. It cannot be used:

- In conjunction with another dental plan or dental insurance.
- For treatment, which in the sole opinion of our doctor, lies outside the realm of their capability
- For referrals for specialists
- For hospitalization or hospital charges of any kind.
- For costs of dental care which are covered under automobile medical
- For services of injuries covered under workers' compensation

- Our program is not transferrable to another party or uncovered family member.
- All fees are shall be based on our practice's UCR (usual, customary, reasonable) fees, which are subject to change.
- Benefit coverage is effective for participants who remain enrolled in their plan at least until the completion of treatment. If enrollment expires before treatment is completed, coverage is no longer available.

This plan is only honored at Denver Dental Arts. It cannot be used at any other dental practice.

By signing below, I acknowledge that I have read and agree to the plan benefits, limitations, and exclusions.

Signature

Date