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> 954-4SMILE-5 954-476-4535 Fax 476-7684

VIP Membership Plan: Adult Plan

I understand that I am to pay the annual sign up fee of \$383.00

Services Included at no charge:

- o 2 Prophylaxis (D1110) or Periodontal Maintenance (D4910) cleanings
- 1 Full Mouth Series X-ray (D0210) or
 4 Bitewings 2 PA's X-ray (D0274 D0220 D02230)
- 1 Exam (One comprehensive or periodic exam)
 (Any and all other X-ray/Exam will be discounted 25%)

Restorative procedures are discounted by 20%

Periodontal procedures are discounted by 20%

The ZOOM in office Whitening Treatment is discounted by 10%.

\$500 off Invisalign treatment

(Implant, Cosmetic & Aesthetic services are subject to review)

Full Name of Enrollee (PLEASE PRINT):	Data
Signature of Enrollee or Guardian: Official use only: Effective dates / /	Date: to / / Employee initials

Refund Policy The member has the right to opt out of the plan for a full refund within 30 days of enrollment as long as treatment has not been started. If any treatment has been performed or if 30 days from enrollment has lapsed, NO refund will be given. The member will be responsible for paying the remaining balance regardless of services rendered.

Terms and conditions: This plan is not dental insurance and cannot be combined with any dental insurance or dental discount plans. Fees are subject to change. Effective date of VIP membership is activated the day that the plan is purchased. Membership coverage is for 12 months from the date of purchase.