### Complete This Form to Begin Coverage Today

Please List All Children You Wish to Enroll

1.	Child's First Name	
	Middle Initial	Son / Daughter
	Date of Birth	
2.	Child's First Name	
	Middle Initial	Son / Daughter
	Date of Birth	

3.	Child's First Name	
	Middle Initial	Son / Daughter
	Date of Birth	

4.	Child's First Name	
	Middle Initial	Son / Daughter
	Date of Birth	

### Your Safety Is Our Top Priority

We have improved our already extremely rigid sterilization standards in order to virtually eliminate the possibility of disease transmission to both staff & patients in our office.



- The Most Advanced Antiseptic Procedures to Meet or Exceed Strict CDC Guidelines
  - & Filtered Water Lines
- **CENTERS** FOR DISEASE **CONTROL AND** PREVENTION
- Heat-Sterilized Instruments
  - Continual Disinfection of Our Office Knowledgeable Staff
  - Who Care Deeply About **Community Health**

# Low-Cost Dental Coverage

Premiums for Less Than \$1/day

## **Enroll** Today!

#### Join Racine Dental Care's In-House Premium Dental Coverage

- All Health Conditions Accepted
- You Cannot Be Denied Coverage
- No Deductibles or Maximums
- No Health Questions
- You Cannot Be Singled Out for Rate Increases or Cancellations!

### Healthy Gums Improve Your **Overall Health**

Research has linked gum disease to health problems like diabetes, heart disease, dementia & respiratory infection. Regular dental cleanings can help you stay healthy & increase your lifespan. Call today for your dental cleaning.



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# Easy & Affordable Dental Coverage

Premiums for Less Than \$1/day

• All Health Conditions Accepted

• No Deductibles or Maximums

• No Health Questions or Hassles

### racine dental care

Further Heightened Sterilization Standards!

### Affordable Dental Coverage for the Whole Family!

Now you can join our low-cost dental coverage for a nominal membership premium. Our coverage entitles you to preventive dental care at no cost! Corrective services are available for small co-payments that are far less than the usual, customary fees. Our professional staff is qualified to care for all of your dental needs!

To enroll, simply fill out the enclosed form  $\mathscr{C}$  return it with your check, money order or credit card information. Please make your check or money order payable to Racine Dental Care.

### Low-Cost Dental Coverage

- Individual Premium ~ \$299/yr.
- Individual & Spouse Premium ~ \$399/yr.
- Family Plan Premium ~ \$499/yr. (2 adults & 2 kids)
- Additional Child in Family Premium ~ \$49/yr.

#### Preventive Dentistry

Dental Services	Co-payment
Examination	No Charge
Adult Cleaning (twice per year)	No Charge
Kid's Cleaning (twice per year)	No Charge
X-Rays (every 12 months)	No Charge
Kid's Fluoride Treatment (twice per year)	No Charge

### Cosmetic Dentistry

Dental Services	Co-payment
Cosmetic Whitening	

#### Restorative Dentistry

Dental Services	Co-payment
Filling	\$150
Crown.	\$850
Dentures (top or bottom)	\$850

#### Other Treatments

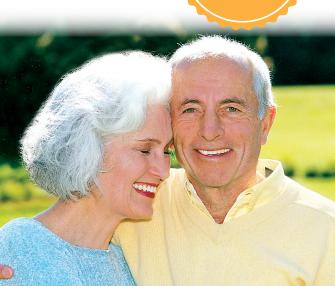
Dental Services	Co-payment
Sealants (per tooth)	
Emergency Exam	No Charge

Healthy

**Gums** Improve

Your Resistance to Disease!

Please Inquire About Services Not Listed Here!



# Complete This Form to Begin Coverage Today!

Last Name		
Middle Initial		Female / Mal
Home Address		
 City	State	Zip
Phone		
Email		
Date of Birth/	/	
Spouse's First Name		
Last Name		
Middle Initial		Female / Mal
Date of Birth/	/	
Enrollment Period	to	)
Signature (member & spous		
		Date
		Date
American Express / Disc		
	cover / Mastercard	l / Visa
American Express / Disc Card Number	cover / Mastercard	l / Visa
American Express / Disc Card Number Expiration Date	cover / Mastercarc r money order payab	l / Visa
American Express / Disc Card Number Expiration Date Make your check or	cover / Mastercarc r money order payab	l / Visa
American Express / Disc Card Number Expiration Date Make your check or Racine Dental Car	r money order payab re.	l / Visa  ole to <b>E</b>
American Express / Disc Card Number Expiration Date Make your check or Racine Dental Car	r money order payab	l / Visa  ole to <b>E</b>
American Express / Disc Card Number Expiration Date Make your check or Racine Dental Car	r money order payab re.	l / Visa  ole to <b>E</b>
American Express / Disc Card Number Expiration Date Make your check or Racine Dental Car	r money order payab e. a c i n e e n t a c a r e	/ Visa 

RacineDentalCare.com

Patients agree that Racine Dental Care co-payments stated must be paid at the time services are rendered Any service not paid for at the time of service will be billed at usual & customary fees. Coverage premiums are valid only when paid at the time of enrollment. All family members must reside in the same household This is not an insurance product. Membership renews annually on the day & month of initial enrollment Membership renews automatically unless member formally requests otherwise in advance.