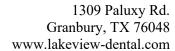


1309 Paluxy Rd. Granbury, TX 76048 www.lakeview-dental.com

Name:					
	Last		First		MI
Address:					
	Street				
	City		State		Zip code
DOB:			SSN: _		
Phone:	Home	Cell		_ Work	
Dependents	s: Name		DOB	I	Relation
Enrollment	Fee: Effective Date:_		Renewa	l Date:	
Patie	ent	Fee	Numbe	r -	Total
BASIC Adult Membership		\$299	X	_	\$
BASIC	C Child Membership	\$199	X	_	\$
Premium Membership		\$499	Χ	9	S





Plan Description

Welcome to the Lakeview Dental Membership Plan. This plan was developed especially for patients who do not have dental insurance or whose employer no longer provides it. As regular dental care is an integral part of your overall health, we have created this plan to support you and your efforts to maintain proper oral health. We hope that you utilize this plan to improve and maintain the oral health for yourself and your family for years to come. Keep in mind that this plan is <u>not dental insurance</u>, but does have a number of great member-only benefits!

- No restrictions, everyone qualifies!
- No pre-existing clauses or frequency limitations
- No annual maximum benefit amount
- No waiting periods Schedule your treatment today!
- No deductibles
- No claim forms or pre-authorizations
- No ID card necessary

Benefits Include:

- One routine dental cleaning per 6 months (2 total on our Basic Plan)
- One Perio maintenance cleaning per 3 months (4 total on our Premium Plan)
- One annual routine dental exam
- Two bitewing X-rays (children) and Four bitewing X-rays (adult)
- One emergency exam and X-ray per membership term
- 50% OFF teeth whitening
- All eligible dental treatment discounted when paid in-full at the time of service.

Enrollment Fees

Payment of enrollment fees initiates coverage. When paid in full, you become eligible for all covered services at a discount for 12 months following sign-up. Discounts are listed on the following page. Families with 2 Adult Members will only be charged for the first 2 children per family.

Basic Adult Membership \$299

Basic Child 12 and Younger \$199

Premium Membership \$499

How To Enroll

- Complete the Enrollment Application
- Pay the enrollment fee in full to activate membership

Contact Us

Please don't hesitate to contact us if you have any questions about enrollment, covered services, eligibility, or our office. For additional information, please call our office at (817) 573-3724 or visit our website at www.lakeview-dental.com

Please bring completed applications and enrollment fees to our office or mail to our address.



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Policies and Exclusions

Eligibility

- This plan is only valid at Lakeview Dental, 1309 Paluxy Rd. Granbury, Tx 76048.
- This in-office membership savings plan is not dental insurance and is not subject to regulation by the state department of insurance.
- To be an independent member, you must be 18 years of age or older.
- Children are 12 and younger for the purposes of this Plan. Families with 2 member adults only pay for their first 2 children members.
- This plan cannot be combined with any other dental insurance.
- This plan cannot be combined with any other offers.
- Membership benefits are not transferable, have no cash value, and may not be redeemed for cash.
- If the patient has and elects to use dental insurance then insurance plan fees, payments, and deductibles will apply.
- All patients are subject to Lakeview Dental office policies.

Payments

- All payments are due at the time of service to receive the full discount.
- If you choose to extend your payment for treatment by paying through Care Credit or through a Lakeview Dental Financial Arrangement the treatment discount is <u>reduced by 5%</u> due to processing fees.
- Enrollment fees must be paid in full to receive discounts.
- · All payments are nonrefundable.
- No refunds will be given if a member and/or spouse or children do not use the plan, relocate, or obtain dental insurance.
- 12-month term is effective from sign up date to renewal date.

Exclusions

- Plans and fees are subject to change at renewal date.
- No discount will be offered for services requiring a referral to a specialist. Referral to a specialist is at discretion of the doctor.
- Should treatment be needed following an injury or other outside normal office hours emergency, discount will not be applied, and after-hours emergency fee will be applied.
- Treatment initiated prior to enrollment is not eligible for discount.
- Prostheses delivered or in-progress treatment completed more than 60 days after termination of coverage is not eligible for discount.
- Treatment fees are guaranteed for 90 days from the date quoted by the office.
- Lakeview Dental reserves the right to discontinue this plan for any member at any time.
- <u>Two no-shows or cancellations without 24-hour notice</u> can lead to you being dropped from this plan without a refund.
- Failure to comply with office policy as agreed upon at time of membership sign-up is grounds for dismissal from this plan with no refund.



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Restrictions and Exclusions

•	All decisions regarding Membership Plan eligibility, benefits, procedures, costs or application rest solely with Lakeview Dental and their staff. Any and all situ detailed out in this Membership Agreement will be handled on a case by case be Lakeview Dental and its staff.	ations not explicitly
Si	gnature	Date



Membership Benefits

- No restrictions, everyone qualifies!
- No pre-existing clauses or frequency limitations
- No annual maximum benefit amount
- No waiting periods Schedule your treatment today!
- No deductibles
- No claim forms or pre-authorizations
- No ID card necessary

Our Basic Plan

(includes 2 routine cleanings, annual checkup and xrays, and 1 emergency visit w/xray per 12 month membership term)

\$199 for Kids under 12, \$299 for Adults

Members are required to pay for all dental services, but fees are at a discounted rate — saving your family thousands of dollars annually.

50% OFF 3D CT scans and Panorex X-rays

20% OFF Periodontal Cleanings, Sealants, and Extractions

15% OFF Crowns, Fillings, Dentures, Partials, Root Canals, and Implants

\$1,000 OFF Invisalign/Orthodontics (restrictions apply)

50% OFF Teeth Whitening

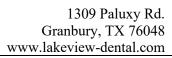
Our Premium Plan

(includes 4 perio maintenance cleanings, annual checkup and xrays, and 1 emergency visit w/xray per 12 month membership term)

\$499

Members who require more than basic care because of gum disease or other causes can enjoy:

35% OFF Periodontal Cleanings, Sealants, and Extractions





20% OFF Crowns, Fillings, Dentures, Partials, Root Canals, and Implants