

DENTAL \$AVINGS PLAN

Our Dental \$avings Plan is designed to provide greater access to world-class dental care at an affordable price.

NO INSURANCE, NO PROBLEM

- ✓ NO yearly maximums
- ✓ NO deductibles
- ✓ NO claim forms
- ✓ NO pre-authorizations
- ✓ NO one will be denied coverage
- ✓ NO waiting periods (immediate eligibility)
- ✓ FREE Consultations



With this discounted fee schedule, you and your family save money on everything from cleanings and fillings to cosmetic procedures, crowns, and dental implants!

MEMBERSHIP PLAN BENEFITS

STANDARD MEMBERSHIP | \$240/YEAR (PATIENTS WITHOUT ACTIVE PERIODONTAL GUM DISEASE)

Savings of \$400+

- 2 Standard Cleanings
- 2 Fluoride Treatments
- 2 Routine Exams
- 1 Emergency Exam
- 1 Set of X-Rays (Full mouth or bitewing)
- \$500 Off Orthodontic Services
- 20% Off All Fees for Dental Services

ADVANCED MEMBERSHIP | \$540/YEAR (PATIENTS WITH ACTIVE PERIODONTAL GUM DISEASE)

Savings of \$1000+

- 4 Periodontal Maintenance Cleanings
- 4 Fluoride Treatments
- 2 Routine Exams
- 1 Emergency Exam
- 1 Set of X-Rays (Full mouth or bitewing)
- \$500 Off Orthodontic Services
- 20% Off All Fees for Dental Services



CLEVELAND
SMILE CENTER

DENTAL \$AVINGS PLAN

Membership Enrollment Form

Program Description

- This is not dental insurance – it is an in-house dental membership plan that is only applicable at Cleveland Smile Center locations.
- This plan cannot be combined with any other dental insurance or financing programs such as Care Credit.
- Membership premium is due at the time of the first exam. This payment amount will be prorated based on the number of months remaining in the current calendar year, in which the patient will only pay for the remaining months, after which membership will be renewed at the start of the following calendar year in January.
- All payments are non-refundable. No refunds or premiums will be issued at any time if the participant decides not to fully utilize plan benefits.
- Participants are subject to a \$100 re-enrollment fee if they cancel and then want to re-enroll in the plan.
- All financial terms of Cleveland Smile Center are applicable to the membership plan.
- Missed or broken appointments without 48-hour notice will be subject to a missed-appointment fee of \$85.
- A patient with active periodontal gum disease requiring advanced periodontal treatment (such as periodontal maintenance, scaling and root planing, debridement, or scaling with inflammation) or a patient with full-arch dental implants will only qualify for the Advanced Membership.
- Membership fees and plan discounts are subject to change on an annual basis.
- Cleveland Smile Center reserves the right to cancel or discontinue this plan for any reason at the end of this membership term.

Member Information

(Please complete)

I understand and agree to the terms listed for the Cleveland Smile Center Dental \$avings Plan.

First _____ Last _____ Date of Birth ____/____/____

Email _____ Phone _____

Credit Card # _____ Exp _____ CVV _____

Signature of Member (or Guardian): _____ Date: _____

Membership Plan Selection

(To be completed by Smile Team Staff – circle plan)

STANDARD MEMBERSHIP | \$240/YEAR
(PATIENTS WITHOUT ACTIVE PERIODONTAL GUM DISEASE)

ADVANCED MEMBERSHIP | \$540/YEAR
(PATIENTS WITH ACTIVE PERIODONTAL GUM DISEASE)

Plan Renewal Date: Month _____ Day _____ Year _____

