## North County Cosmetic and Implant Dentistry

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## **Adult Membership Agreement**

I understand that this membership consists of the following:
2 Healthy Mouth Cleanings 2 Oral Cancer Screenings 1 Periodontal Measurement Exam 2 Fluoride Treatments 2 Doctor Exams 1 Set of Check Up X-Rays 1 Emergency Exam and X-Ray
10% off any treatment with doctor
Exclusions and Limitations
Some services may be excluded from this membership, such as but not limited to, any take-home products.
Unused benefits do not roll over to the next benefit period.
Benefit Periods/Renewals
A calendar year benefit period is from January - December. Renewal payments are processed on December 15th.
A fiscal year benefit period is from July - June. Renewal payments are processed on June 15th.
Unused benefits expire at the end of each benefit period.
Cancellation Policy
Written notice must be given 30 days prior to the auto renewal date.
Consent
I consent to have my renewal payment charged to the card on file on the auto renewal date.
Payment Options
Sout total + \$69 Lifetime Activation Fee + No Annual Renewal Fee \$42/month + \$169 Lifetime Activation Fee + \$69 Annual Renewal Fee
Benefit Period  C January-Deceber, Calendar Year  C July-June, Fiscal Year
SignatureDate
Response Date: 5/9/2023