



## The Golden Dental Membership Plan

Our goal is to provide quality dental care that is affordable for everyone. Benefits of becoming a member of our dental plan:

- ~ No Annual Deductible
- ~ No Annual Maximums
- ~ No Prior Authorizations
- ~ No Waiting Periods
- ~ No Claim Forms
- ~ No Insurance Cards
- ~ No Limitations for Pre-existing Conditions
- ~ Discount on dental services

Services Included for one year (effective date of purchase)

<b>Description</b>	<b>Quantity</b>	<b>Value</b>	<b>You pay</b>
Professional cleanings	2	\$206.00	\$0.00
Regular exams	2	\$118.00	\$0.00
Routine x-rays	1 set of bitewings, 3 Periapicals	\$165.00	\$0.00
Fluoride treatment	2	\$60.00	\$0.00
Emergency Exam	1	\$89.00	\$0.00
Total:		\$638.00	Membership \$376.

**Savings for one year: \$262**

**\*\*Additional 15% savings on all other dental services\*\***

One year membership	\$376.00
2 <sup>nd</sup> Family member:	\$356.00
Children (under age 14)	\$316.00



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\* Annual enrollment fees are due at the first appointment of the year, or can be paid ahead for the following years enrollment. The plan duration is 12 months with no exceptions and no carry over benefit to the next plan year.

\* Annual enrollment fees paid for each person are non- refundable with exception of patient relocation or death. Refund will be prorated to reflect remaining benefit of the membership.

\* All treatment must be paid in full at each visit to keep the plan in effect. No exceptions.

\* Family members cannot be substituted for other family members. Enrollee's name must be stated at the time of enrollment. Children are covered at the child rate up to the age of 13 years old, then covered under the adult rate at age 14 and up.

\* This is an in- house dental plan and is not dental insurance. It cannot be combined with any other cash/ senior discount or dental insurance.

\* The preventive and diagnostic services listed are the services provided and no substitutions will be made. If the services listed are not wanted or used during the plan's 12 month period, they do not carry over or transfer to a new plan.

\* Membership is good only at the office James N. Golden DMD – NPI #1972607539. Any treatment outside of this office is not included in this in-house dental plan.

**I agree to these terms of the The Golden Dental Center Membership Plan.**

Print Patient Name: \_\_\_\_\_

Sign Patient or Guardian Name: \_\_\_\_\_

Date: \_\_\_\_\_ Amount Paid: \_\_\_\_\_