

Please List All Unmarried Children Up to Age 22

Please Fill Out & Send This Form in Today to Begin Coverage!

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

Low-Cost Dental Coverage

As Low as \$19/mo.

Our office is located on North Avenue, just north of Meyer Toy World.



AFFORDABLE DENTAL COVERAGE

For You & Your Entire Family

As Low as \$19/mo.

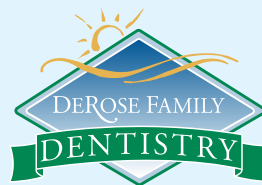


ENROLL TODAY!

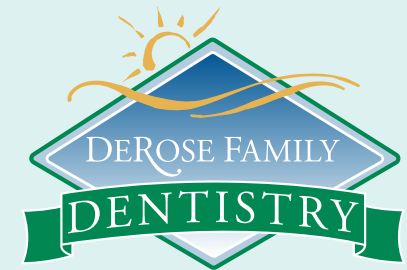
Join DeRose Family Dentistry's In-House Premier Dental Coverage

It's a discounted fee schedule for most services, only good at DeRose Family Dentistry. You save on everything from cleanings & fillings to cosmetic procedures & crowns!

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



131 North Avenue
Battle Creek, MI 49017
(269) 963-3894



www.DeRoseFamilyDentistry.com  Find us on Facebook



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We're Making Excellence in Dentistry Affordable for You!



LOW-COST DENTAL COVERAGE

Now you can join our low-cost dental coverage for a nominal membership fee. 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 enrollment form & return it with your check, money order or credit card information. Please make check or money orders payable to DeRose Family Dentistry.

Low-Cost Dental Coverage

- Individual ~ \$225/yr. or \$19/mo.*
- Individual & Spouse ~ \$395/yr.
- Family Plan 1 ~ \$495/yr.
(two adults & two kids up to age 14)
- Family Plan 2 ~ \$595/yr.
(two adults & two kids age 14-22)
- Additional Child ~ \$50/yr. (up to age 14)
- Additional Child ~ \$99/yr. (age 14-22)

*Monthly payment plan is available to patients providing direct deposit or credit card access.



Preventive Dentistry

Service	Co-Payment "Basic Care"	Regular Fees as High as
Examination	No Charge	\$40
X-Rays (every 12 months)	No Charge	\$50
Adult Cleaning (every six months)	No Charge	\$75
Children's Cleaning (up to age 14, every six months)	No Charge	\$54
Fluoride Treatment for Children (every six months)	No Charge	\$35

Please Inquire About Services Not Listed Here!

Fillings

Service	Co-Payment as Low as	Regular Fees as High as
1 Surface	\$102	\$140
2 Surfaces	\$125	\$183
3 Surfaces	\$143	\$225
4 Surfaces	\$185	\$280

Periodontics

Service	Co-Payment "Basic Care"	Regular Fees as High as
Soft-Tissue Management (per quadrant)	\$185	\$200
Periodontal Maintenance	\$90	\$110

Crowns/Bridges

Service	Co-Payment "Basic Care"	Regular Fees as High as
Porcelain or Gold Crown (per unit)	\$800	\$1,000

Other Treatments

Service	Co-Payment "Basic Care"	Regular Fees as High as
Cosmetic Consultation	No Charge	No Charge
Cosmetic Whitening	\$400	\$570
Emergency Exam with X-Rays	\$45	\$89
Sealants (per tooth)	\$30	\$40
Nightguard	\$500	\$650



Please Fill Out & Send This Form in Today to Begin Coverage!

First Name _____

Last Name _____

Middle Initial _____ Female / Male

Home Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

Date of Birth ____/____/____ S.S.# ____-____-____

Spouse First Name _____

Last Name _____

Middle Initial _____ Female / Male

Date of Birth ____/____/____ S.S.# ____-____-____

Enrollment Period _____ to _____

Signature (member & spouse) _____

_____ Date _____

_____ Date _____

American Express / Discover / MasterCard / Visa

Card Number _____

Expiration Date _____

Make check payable to DeRose Family Dentistry.



131 North Avenue, Battle Creek, MI 49017

(269) 963-3894

www.DeRoseFamilyDentistry.com



Patients agree that DeRose Family Dentistry fees 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 fees 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.