

Gold Dental Enrollment Application

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Your Profile

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Name		SSN	DOB	
Address				
City	State	Zip		
Home Phone		Cell		
Email Address		Work phone		
Your Spouse Profile				
Name		SSN	DOB	
Address				
City	State	Zip		
Home Phone		Cell		
Email Address		Wo	ork phone	
/our Children				
Name		Age		
Enrollment Fees		Cr	edit Card Number	
\dult= \$250X=	_	Ex	p date CVV Code	
Children= \$200 X=		Total to be charged		
Fotal=			Authorized Signature	Date
		Terms and Cond	ditions on Next Page	



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Terms and Conditions of Horizon Dental Gold Plan

Eligibility

- This plan is only good at Horizon Dental Care.
- This in-office discount plan is not a dental insurance.
- To be a independent member you should be at least 18 years of age.
- Your eligible dependents include spouse or domestic partner and children through the age of 25.
- This plan cannot be applied with any other dental insurance or any other offers.
- If the patient elects use a dental insurance; insurance plan fees, payments, and deductibles will apply.
- All patients are subject to Horizon Dental Care policies.

Payments

- Enrollment fees must be paid in full at the time of enrollment to receive discounts. A payment plan CANNOT be used for enrollment fees.
- All payments for treatment must be paid in full at the time of service to receive discount. Any services that are not paid in full will be billed at our full fees.
- All payments are non refundable.
- No refunds will be given if the member does not use the plan benefits, relocates, or obtains dental insurance.
- 12 months term effective from enrollment date or renewal date.

Exclusions

- Invisalign and orthodontic treatment are discounted at 10% if the entire payment is made up front.
- Plans and fees are subject to change yearly.
- No discount is provided for services requiring a referral to a specialist outside of the practice.
- Should treatment be needed following an injury of 3rd party insurance is involved the discount cannot be used.
- Treatment initiated prior to enrollment is not eligible for discounts.
- Prosthesis delivered or in progress treatment completed more than 60 days after the termination of coverage is not eligible for discounts.
- Horizon Dental Care reserves the right to discontinue this plan for any member at any time.
- Two no shows or cancellations without 48 business hours notice can lead to you being dropped from the program without any refund.
- If you chose to extend your payments through a 3rd party financing such as Care Credit the dental discount will be reduced to 10% due to merchant fees.
- Dental products are not included in discount.

I, ______ acknowledge the terms and conditions of Horizon Dental Care Gold Discount Plan. I understand that it is NOT a dental insurance but is an in-office discount plan.

Signature_____Date_____Date_____



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No Insurance? We have you covered!

Horizon Dental Care Dental Plan

We have designed this plan so everyone can have access to good dental care. We believe preventive care is essential for good oral and general health. The Horizon Dental plan is an affordable option for individuals and families with no dental insurance. We hope that you can utilize this plan to maintain and improve the dental health of your family for years to come. Please note that this is NOT DENTAL INSURANCE.

Annual enrollment fees:

Adults \$250 Children (13 and under) \$200

How to enroll?

- Complete the application form and mail or fax to our office.
- Pay enrollment fees to activate membership.

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Two routine Dental Cleanings and Exams	Included
Unlimited Digital X-rays	Included
Oral Cancer Screenings	Included
Fluoride Treatment for Children	Included
One Emergency Visit	Included
Deep Gum Cleaning	20% off
Restorative Work (fillings)	20% off
Cosmetic Work	20% off
Implants	20% off
Root Canals	20 % off
Crowns and Bridges	20% off
Partials and Dentures	20% off
Extractions	20 % off

Please contact our office for more information and sign up for the plan!