

*Enroll Today
and
Smile Tomorrow!*

For a simple annual enrollment fee, you will receive professional and comprehensive dental care at substantially reduced rates.

The Advantages

- Low Cost
- No Deductible
- Pre-Existing Conditions Covered
- No Annual Maximums
- No Claim Forms No Waiting Periods

Your Entire Family is Eligible

- Spouse(s) and Dependents
- Unmarried Children to Age 19
- Unmarried Full-Time Students to Age 23



**ALLATOONA
FAMILY DENTAL**

DR. MARK A. FITZGERALD

Contact us at:
(770)382-5678

100 Courtyard Drive
Cartersville, GA 30120

Hours: Monday-Thursday 8-5, Friday 8-1



www.CartersvilleSedationDentist.com

facebook.com/CartersvilleSedationDentist
twitter.com/sedationdmd



**DENTAL BENEFIT
MEMBERSHIP PROGRAM**

*Your Savings Plan
to "Personal Dentistry"*

*Treatment you need,
at prices you can
afford.*

DESCRIPTION

This is an annual reduced fee dental plan that allows individuals and families to receive quality dental services from Allatoona Family Dental for a percentage off the office's usual, customary, and reasonable (UCR) fees. This is not an insurance plan, no claims are filled, and no payments are made to any other healthcare providers. Allatoona Family Dental is not a licensed insurer, health maintenance organization, or other underwriter of health services.

This plan may not be combined with any other offers, discounts, insurance, discount plans, or advertisements.

SAVINGS

Standard membership includes:

- Two (2) Dental Prophylaxis (routine healthy mouth dental cleanings)
- Standard Annual X-Rays
- Two (2) Exams per Year
- Two (2) Fluoride Treatments up to Age 18

Note: Should a member require periodontal maintenance following a deep cleaning or due to periodontal disease, membership requires the annual Periodontal Membership, which includes four periodontal maintenance hygiene visits per year lieu of any dental prophylaxis appointments.

15% SAVINGS ON DENTAL SERVICES*

Now Includes Cosmetic, Whitening, Sedation and Implant Services. Cannot be combined with other specials and promotions.

EXAMPLE SAVINGS

	UCR	Member	Savings
Periodic Oral exam	\$70	\$0	\$70
4 Bitewing X-Ray	\$87	\$0	\$87
Routine Cleaning, Adult	\$124	\$0	\$124
Filling, Tooth-Colored One Surface Posterior	\$249	\$211.65	\$37.35
Tooth Extraction Surgical	\$395	\$335.75	\$59.25
Periodontal Deep Cleaning, Full Mouth	\$1400	\$1190	\$210

LOW ANNUAL FEE

Annual Membership Adult/Teen	\$325
Annual Membership - Pediatric (<14 years)	\$225
Annual Periodontal Maintenance (4 visits.yr)	\$599

MEMBERSHIP

Once the annual membership fee is paid, you will be entitled to the dental benefit membership program for the following 12 consecutive months. Any member that has not utilized any benefits during the membership period has the right to cancel at any time by submitting a written request.

Any refund will be calculated on a pro-rated reimbursement of the annual fee(s) paid, less a \$40 processing fee per member.

