



NO INSURANCE?
No Problem With
Klassen Care

YOUR MEMBERSHIP INCLUDES:

- ✓ One comprehensive exam
- ✓ A complete set of x-rays (new patients) OR 4 bitewings (existing patients)
- ✓ One additional periodic check-up
- ✓ Two preventive cleanings (*does not include deep cleanings)
- ✓ Oral cancer screening
- ✓ Two fluoride treatments
- ✓ Any additional x-rays needed throughout the year
- ✓ 15% OFF Treatment: extra cleanings (more than 2), periodontal/gum treatments, fillings, sealants, crowns, root canals, extractions, dentures and veneers.

Annual Premiums

Single	\$411 (savings of \$113)
Family of 2	\$771 (savings of \$227)
Family of 3	\$1143 (savings of \$329)
Family of 4	\$1,494 (savings of \$452)
Each Additional	\$360

***For husband/wife, parent/child only**

Compare to Typical Dental Insurance

	Klassen Care	Insurance
Annual Premium (single)	\$411	\$500
Deductible / Co-pay	\$0	\$50-\$250
Maximum Yearly Allowance	Unlimited	\$1000-\$15000
Waiting Period	None	Up to 12 months
Annoying Paperwork	None	Lots

Guidelines:

- Membership fees are due up front and are non-refundable
- Patient’s portion of bill is due on day of service (for fillings, crowns, etc.)
- Membership expires 12 months after signing up. Benefits can be used anytime during that period
- Membership cannot be suspended or “frozen”
- Membership is non-transferable
- Cannot be used in conjunction with another payment plan (such as Care Credit) or dental insurance
- Membership is only for services rendered in the office of Carly Klassen, DDS, PA

Membership cannot be used for:

- Any payment due to a specialist or hospital
- Treatment which, in the sole opinion of Dr Klassen, lies outside the realm of her capability
- For services of injuries covered under worker’s compensation

By signing below, I acknowledge that I have read the membership details of Klassen Care and understand that it is not insurance. I agree to pay membership fees upon enrollment and abide by the plan’s guidelines and limitations. Carly Klassen, DDS, PA reserves the right to modify the Klassen Care membership fees, terms, and services after twelve months.

*Membership Expires 12 months from enrollment date.

Name(s) of those enrolled: _____

Signature of Responsible Party: _____

Date: _____

Expiration Date: _____