Complete This Form to Begin Coverage Today

Please List All Children You Wish to Enroll

1.	Child's First Name	
	Middle Initial	Son / Daughter
	Date of Birth	
2.	Child's First Name Middle Initial Date of Birth	Son / Daughter

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

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

Our Affordable Coverage Includes the Following Services at No Charge:

- Comprehensive Exam (once every 6 months)
- Fluoride Treatment for Children (under the age of 18, once every 6 months)
- X-Rays (once every 12 months)
- Cleaning (Prophylaxis) (once every 6 months)

Low-Cost Dental Coverage Less Than \$1/day



We are located at the corner of New Hampshire Avenue & Randolph Road, next to 7-Eleven & McDonald's.



We are located on Lynx Lane, above David's Natural Market.

Enroll Today!

Join Dynamic Dental Care's In-House Premier Dental Coverage

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



• Silver Spring •

301-879-8337

13401 New Hampshire Avenue Silver Spring, MD 20904

Columbia, MD 21044 410-910-9716

• Columbia •

5410 Lynx Lane, Suite 290

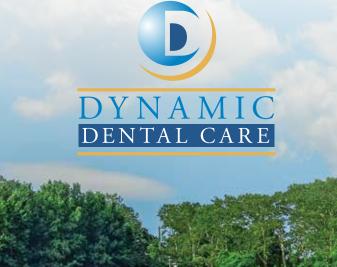
DynamicDDS.com

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Affordable Dental Coverage For You & Your Entire Family



Less Than \$1/day



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 your check or money order payable to Dynamic Dental Care.

25% Off Services Not Listed Here!

Low-Cost Dental Coverage

- Individual ~ \$300/yr. (equals \$25/mo.)
- Additional Person in Family ~ \$250/yr. (equals \$20.83/mo.)

Preventive Dentistry

Service	Co-Payment
Examination	No Charge
X-Rays (every 12 months)	No Charge
Adult Cleaning	No Charge
Children's Cleaning	No Charge

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//				
Spouse First Name				
Last Name				
Middle Initial Female / Male				
Date of Birth//				
Enrollment Period to				
Signature (member & spouse)				
Date				
Date				
American Express / Discover / Mastercard / Visa				
Card Number				
Expiration Date				
Make your check or money order payable to Dynamic Dental Care .				



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