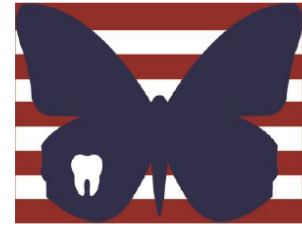


Mariposa Dental Plans, USA

"Home of the #1 Preventive Dental Plan in the world"

info@smilearizonadentistry.com (480) 994-5225



We warmly and genuinely welcome you, your family and group/business to our in-house dental plan and to our dental family! We are proud to provide the most comprehensive dental plan we have seen for adults and children, focusing on true preventive care and overall patient wellness and health.

GROUP PLAN A: Preventive

\$79.00 each individual to join (2 families or more = a group)

- \$45.00/month- Adults, \$35.00/month- Children
- Includes 3 preventive cleanings/benefit year
- All exams
- All Radiographs "X-rays"
- Bacteria reducing laser and irrigation
- Fluoride
- Oral Cancer Velscope Screening biannually (2X per year)
- **30% OFF** All Dental Treatment

GROUP PLAN B: Periodontal

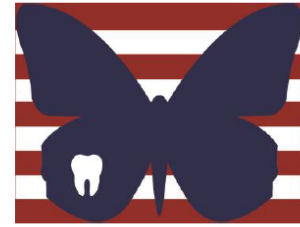
\$79.00 each individual to join (2 families or more = a group)

- \$55.00/month- Adults, \$40.00/month- Children
- Includes 4 periodontal cleanings/benefit year
- All exams
- All Radiographs "X-Rays"
- Bacteria reducing laser and irrigation
- Fluoride
- Oral Cancer Velscope Screening biannually (2 X per year)
- **30% OFF** All Dental Treatment

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Individual Plans:

\$299.00 per individual to join

Welcoming All-Inclusive Appointment Including exam, all necessary films, periodontal/gums exam with recordings and a Prophy "regular" cleaning or "Gingivitis cleaning" with your \$299.00 onetime fee to join. (This does not include a deep cleaning but does include a complimentary follow up evaluation appointment after a deep cleaning.)

INDIVIDUAL PLAN A: Preventive

- **\$45.00/month**- Adults, **\$35.00/month**- Children
- Includes 3 preventive cleanings/benefit year
- All exams
- All radiographs "X-Rays"
- Bacteria reducing laser and irrigation
- Fluoride
- Oral Cancer Velscope Screening biannually (2x/year)
- **30% OFF** All Dental Treatment

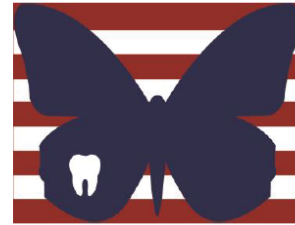
INDIVIDUAL PLAN B: Periodontal

- **\$55.00/month**- Adults, **\$40.00/month**- Children
- Includes 4 periodontal cleanings/benefit year
- All exams
- All radiographs "X-Rays"
- Bacteria reducing laser and irrigation
- Fluoride
- Oral Cancer Velscope Screening biannually (2X/year)
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The Fine Print...

All Family members are welcome: spouses, domestic partners, children, stepchildren, domestic stepchildren, and others. All Inclusive: no screening, proof of relationship status, no permanent address proof or other identification is required. (Two adults and unlimited number of children can be on this plan under one contract. A child is up to the day before their 18th birthday.)

Plan enrollment is annual: A \$299.00 individual start fee is charged to the (individual) patient and paid directly by the patient at the first appointment. When joining as a group (2 families or more) \$79.00 per person to join. Patients may cancel the plan anytime in writing after a minimum of 2.99 months from the last Periodontal Plan appointment or 3.99 months from the last Preventive Plan appointment. If the plan is canceled and there is a lapse before re-subscribing later, the \$79 group or \$299 individual start fee will be charged again. The hygiene appointments are offered at true cost, and to ensure fairness to all, we cannot absorb the additional costs of hygiene care appointments. Cancellation can also be processed immediately by paying the true cost of the last hygiene visit rendered.

Open Enrollment: Mariposa Dental Plans USA has a true open enrolment, meaning it is not limited to one month of the year. Many corporate plans typically list open enrollment in the fall before year end (or one designated month of the year.) Enrollment for Mariposa Dental Plans USA is available every month of the year.

Payments: The first payment per enrollee indicates the start date of the enrollee's annual contract and all other monthly payments must be received by autopay the 1st or the 15th of each month. There is a firm 25% penalty for late payments but after a 7-day grace period. All group payments need to be made to Mariposa Dental Plans USA from a business entity. (No personal payments accepted from your employees.) Individual plans are paid directly by credit card if on file. If your credit card on file cannot be processed, we are obligated to message you one time with this information. If it is not updated within the 7-day grace period, you may be required to re-enroll with the accompanying fees associated to do so.

30% Discount applies to all services; it does not apply to any products, electric toothbrushes and the like and not to prescriptions as well. Watch our exciting periodic promotional discounts on cosmetic services including Whitening, Botox, Dermal fillers, Threading and our exciting progressive Skin Resurfacing and Wrinkle Smoothing device, *The Opus*, delivering Plasma Energy and *The TED*, our Hair Regeneration and Thickening Device. Complimentary cosmetic consultations are available for all plan members.

Our very best patients are by your referrals and by word-of-mouth. For any business referral you or any of your team sends us and the business starts a contract with Mariposa Dental Plans, USA, that one family will receive a month of the plan complimentary as our way of saying thank you. For any individual patient referral, we have our bonus gifts listed online and have a referral sheet available in office. We appreciate your working hard to spread the word of excellent dental health and thus we want to reward you for your work!

This is a legally binding contract; by signing below you acknowledge this, if signing for a group, you are the owner or have the authority to sign for the company entity and any changes to this contract need to be made in writing as indicated above. No verbal changes will be accepted.

Printed Name: _____

Signature: _____

Company Name (if a group plan): _____

Date: _____

Mariposa Dental Plans USA representative _____