

Dental Reward Certificate

This certifies that the patient below has completed the following:

Patient Name

Cleaning Date: _____

Cavities:

Yes

No

Hygienist Name: _____

Please Print Full Name

Doctor or Practice Name: _____

I'm a patient of Amherst Orthodontics and earn rewards for seeing you on a regular basis. Thank you for completing this Certificate!

Did you know hygienists get rewards too?

Every completed certificate gets entered into a monthly drawing.



Drs. Deborah A. DeBeradinis & E. Diane Shieh

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