



Kingston
ORTHODONTICS
the power of your smile

Patient Name

I am participating in a hygiene rewards program at Kingston Orthodontics.

I receive point for good oral hygiene, and I receive **two points** when I attend for a routine visit to see you.

Thank you for completing this voucher!

This certifies that the above patient has completed the following:

(Please check all that apply)

Routine cleaning _____

No Cavities _____

Hygienist/Assistant signature: _____ Appointment Date: _____

Redemption value: 2 rewards points