



1370 Washington Pike, Suite 104  
Bridgeville, PA 15017

## Dental Appointment Reward Certificate

I am a patient of Sohn Orthodontics and participate in the Patient Rewards Program.

Patients can earn points for regular hygiene appointments and having no cavities.

Returning this certificate at my next orthodontic appointment assures points will be added to my Patient Rewards Account.

Thank you for completing this certificate!

---

Patient Name

This certifies the above patient has completed the following:

\_\_\_\_\_ Dental exam/Cleaning

\_\_\_\_\_ Patient presents with good Oral Hygiene and No Cavities

Appt. Date: \_\_\_\_\_ Dr. or Practice Name: \_\_\_\_\_

---

Dentist/Hygienist Signature

