

BRACES

&

ALIGNERS.



KLEIN & COOK

ORTHODONTICS, LLC

WE LOVE TO MAKE YOU SMILE

Complete this card with your hygienist and return it to us for entry into our *Grinefits Prize Drawing!*

PATIENT NAME

PATIENT PHONE

NAME OF DENTIST/DATE OF DENTAL VISIT

HYGIENIST NAME

HYGIENIST SIGNATURE

