



KENNELL
ORTHODONTICS

Dental Reward Certificate

PATIENT NAME

I am a patient of Kennell Orthodontics and
earn reward points for seeing you on a regular basis.

Bringing in this Dental Reward Certificate at my next appointment guarantees
points.

Thank you for completing this certificate!

Please circle all the apply

Dental Exam

Cleaning

Requested Treatment Completed

Patient Presents with Good Oral Hygiene and No Cavities

Dentist/Hygienist Initials: _____

Appointment Date: _____

Dr. or Practice Name: _____