



I want to take this opportunity to welcome you to Aqua Dental office. Thank you for choosing and entrusting us as your dental healthcare provider.

### **Financial Policy**

Payment is due at the time services are rendered, which includes self-pay, insurance copays and/or deductibles. A current insurance card must be presented before services are rendered. As a service to our patients, a representative from our office will contact your insurance company to verify benefits and eligibility. Our office will strive to maximize your benefits. However, the remainder of the balance after the estimated insurance portion will be the responsibility of the patient on the date of service.

Accounts with balances are considered past due at 31 days without a payment. Once an account is delinquent 90 days past due, it will be considered for collection procedures and placed with an independent agency. Should your account be turned to an independent agency for collection procedures, all future services will be on cash only basis.

We realize information surrounding dental health care can be difficult and confusing at times, which is why we are here to assist in this process. If you have any questions or should feel that you cannot meet the terms set forth with this financial policy, please feel free to contact our office at (918) 455-7700.

Again, thank you for choosing Aqua Dental. We look forward to serving you.

Sincerely,  
Deborah Davis  
Financial Coordinator

“I have read, understand and agree to the provision of this financial policy.”

\_\_\_\_\_  
Patient's Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Patient/Legal Guardian's Signature



## RELEASE OF PHOTOGRAPHY RIGHTS

I, \_\_\_\_\_, parent/guardian of

\_\_\_\_\_ patient of Aqua Dental  
give permission for the practice to take and use photographs of the above child for  
website, publicity, or general office use. Aqua Dental office will not sell or distribute any  
photographs for third party use.

Signature of parent/guardian: \_\_\_\_\_

Date: \_\_\_\_\_