

# Starlite Dental Plan

a healthier smile for life



Starlite  
Dental  
Finberry

01233 502231

[www.starlitedentalpractice.com](http://www.starlitedentalpractice.com)

## Why join the DentalPlan?

Regular check-ups and hygiene treatment are essential for a sparkling smile and good oral health. The DentalPlan brings you the latest preventative dental care for a low monthly fee.

## What does the plan include?

- Up to two check-ups per year
- All necessary intra-oral x-rays
- Up to two hygiene appointments per year for cleaning and polishing
- Oral hygiene and dietary instruction
- Access to our dental emergency service during normal hours (fees apply)
- Optional worldwide dental accident and emergency cover
- A discount on private fees for general dental treatments (exclusions apply)
- Priority appointments

## Plans for children

For a reduced monthly payment children receive all of the adult benefits, as well as special dietary advice and fissure sealants in permanent teeth. One parent or carer must be a registered patient with the practice.

The monthly cost of the adult plan is just £14 and the children's plan is £6. Children under 4 are free.

## Family membership

You can save on the monthly subscription when family members join, the family discounts are:

2 group members – 5%

3 group members or more – 10%

Please note that for family discounts all patients must live at the same address and use the same Direct Debit.

**On the adult plan you save £42 per year  
on routine treatment plus  
any additional discounts**



## Join today and start enjoying the benefits

Simply fill out the application form then hand it in to our receptionist or post it to the address on the back of the form. There is a one-off joining fee of £10 for adults and £5 for children, which will be collected together with the first monthly payment.

The DentalPlan members can choose dental accident and emergency cover for just 97p per month. For full terms and conditions see [www.codeplan.co.uk/cover](http://www.codeplan.co.uk/cover).

## Your registration

You may withdraw from the plan at any time by giving 3 months notice in writing to CODEplan.



## Practice opening times

**Monday, Wednesday and Friday**  
8.15am – 6pm

**Tuesday and Thursday**  
8.15am – 8pm

**Saturday**  
9am – 1pm

**BETWEEN**

**“THE DENTAL SURGEON”**

Dr. Kaumudi Dhutia  
BDS Ncle I983 GDC No. 57715

Starlite Dental Finberry  
37 Avocet Way  
Finberry, Kent TN25 7FR

Agreement start date

Backdated

**AND**

**THE “PATIENT/PAYER” WHO IS THE CONTRACT HOLDER**

Title Mr/Mrs/other     First name

Surname

Date of birth         Dentist initials   Gender

Address

Town

County

Email

Telephone

Monthly fee £

Optional dental accident and emergency cover 97p per month

Group discounts: 2 persons 5%, 3 persons or more 10% \*  
The following group members are included in this plan

Title Mr/Mrs/other     First name

Surname

Date of birth         Age    Gender

Dentist initials   Monthly fee £

Optional dental accident and emergency cover 97p per month

Title Mr/Mrs/other     First name

Surname

Date of birth         Age    Gender

Dentist initials   Monthly fee £

Optional dental accident and emergency cover 97p per month

Title Mr/Mrs/other     First name

Surname

Date of birth         Age    Gender

Dentist initials   Monthly fee £

Optional dental accident and emergency cover 97p per month

If you have more than 4 in your group please attach an additional form  
\* Children under 4 do not increase group discount

Discount

%

Total with discount

The monthly fee for adults is £14, children under 4 are free so long as one parent or carer is on the plan. For children aged 4 to 17 years it costs just £6 per month. Family discounts apply.

Method of payment

Collected monthly by Direct Debit on the first working day of each month

I accept this agreement:

Patient/Payer's signature \_\_\_\_\_ Date DD MM YYYY

Treating Dentist's initials \_\_\_\_ Name \_\_\_\_\_

Signed for and on behalf of the Dentist \_\_\_\_\_ Date DD MM YYYY

Data Protection Act: your data will be kept confidential but we may send it confidentially to other companies for processing payments or correspondence about your membership. By signing this Agreement you are consenting to such use of personal details.

**Instruction to your bank or building society to pay by Direct Debit**



Name and address of your bank or building society

To the manager \_\_\_\_\_ Bank/building society

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Name(s) of account holder(s)

\_\_\_\_\_

\_\_\_\_\_

Branch sort code \_\_\_\_\_ Bank account number \_\_\_\_\_

Reference S T A R L I T E

Service user number 6 8 8 1 0 9

Instruction to your bank or building society: Please pay CODEplan Ltd Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with CODEplan Ltd and if so details will be passed electronically to my bank/building society.

Signature(s) \_\_\_\_\_ Date DD MM YYYY

Banks and building societies may not accept Direct Debit instructions for some types of accounts.

**THE DIRECT DEBIT GUARANTEE**



- This guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit CODEplan Ltd will notify you 5 working days in advance of your account being debited or as otherwise agreed.
- If you request CODEplan Ltd to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit, by CODEplan Ltd or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society.
  - If you receive a refund you are not entitled to, you must pay it back when CODEplan Ltd asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

Please complete this form, detach it and post it to:  
**CODEplan, Elm Tree House, Bodmin Street, Holsworthy, Devon, EX22 6BB**



## Questions

If you have any questions please call the practice or speak to your dentist who will be happy to help.

## Problems

If you have any problems please contact our Practice Manager. We have a complaints procedure that we follow to ensure that complaints are resolved as quickly and easily as possible.

## Our dentists

Dr Kaumudi Dhutia BDS Ncle 1983  
GDC no. 57715

## Starlite Dental Finberry

37 Avocet Way  
Finberry  
Kent  
TN25 7FR

T: 01233 502231

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