

# Retford

Dental Centre

**The Retford Dental Plan**  
a healthier smile for life



## Why join the Retford Dental Plan?

Regular examinations and hygiene treatments are essential for a sparkling smile and good oral health.

To help you budget for your dental treatment costs, we offer our own dental plans which we believe to be the best way to make treatment affordable and give you a greater freedom of choice.

### Maintenance plan

Our maintenance plan covers your essential preventative dental care and includes:

- Up to 2 examinations per year
- Up to 2 x-rays per year
- Up to 2 hygienist appointments per year for cleaning and polishing
- Oral hygiene and dietary instruction
- Access to our dental emergency service during normal hours (fees apply)
- 10% discount on private fees\*
- Worldwide dental accident and emergency cover
- Priority appointments

\*Discount exclusions; cosmetic treatment, any treatment outstanding before joining the plan, treatment related to implants.

### Care plan

Our care plan covers all routine and essential dental treatment, the only additional cost is for dental laboratory work. The cost of the care plan varies according to your estimated treatment needs. Following an initial assessment, your dentist will be able to confirm your monthly fee. The care plan includes;

- Up to 2 examinations per year
- All necessary x-rays
- Up to 2 hygienist appointments per year
- Oral hygiene and dietary instruction
- Priority access to our dental emergency service during normal hours
- All necessary fillings
- Gum (periodontal) treatment
- Crowns (excluding laboratory fees)
- Bridges (excluding laboratory fees)
- Dentures (excluding laboratory fees)
- Root canal treatments
- Worldwide dental accident and emergency cover

Not included in the care plan; treatment related to implants, cosmetic treatments and any treatment outstanding prior to joining the plan.

**Our maintenance plan costs just £15 per month,  
our care plans start from £18 per month**



## Join today and start enjoying the benefits

Simply fill out the application form then hand it in to our reception or post it to the address on the back of the form. There is a one-off joining fee of £10 per patient.

Retford Dental Plans include worldwide dental accident and emergency cover, for full terms and conditions see [www.codeplan.co.uk/cover](http://www.codeplan.co.uk/cover).

## Family membership

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

- 2 group members – 5%
- 3 group members – 10%
- 4 group members or more – 15%

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

## Your registration

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

## Practice opening times

**Monday to Friday**  
**8.30am to 5.30pm**

**BETWEEN**

**“THE DENTAL SURGEON”**

Dr T Ganesh BDS (Lond), MJDF RCS (Eng),  
PGCDE, FHEA

Retford Dental Centre  
79 Retford Road, Romford  
Essex, RM3 9ND

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  M  F

Address

Town

County

Email

Telephone

Monthly fee £

Maintenance plan  Care plan

**Group discounts: 2 persons 5%, 3 persons 10%, 4 persons or more 15%**  
The following group members are included in this plan

Title Mr/Mrs/other     First name

Surname                  Age    Gender  M  F

Date of birth                  Dentist initials   Monthly fee £

Maintenance plan  Care plan

Title Mr/Mrs/other     First name

Surname                  Age    Gender  M  F

Date of birth                  Dentist initials   Monthly fee £

Maintenance plan  Care plan

Title Mr/Mrs/other     First name

Surname                  Age    Gender  M  F

Date of birth                  Dentist initials   Monthly fee £

Maintenance plan  Care plan

If you have more than 4 in your group please attach an additional form

The maintenance plan costs £15, care plans start from £18. Family discounts apply

Total monthly fee

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 R E T F O R D

Originator's identification 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 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 T Ganesh BDS (Lond) 1996, MJDF RCS (Eng), PGCDE, FHEA, GDC 72292

Dr (Mrs) R Babla UK Statutory Exam 2004, GDC 83845

Dr V Patel BDS (Cardiff), MJDF RCS (Eng), GDC 176440

and associates

## Retford Dental Centre

79 Retford Road  
Romford  
Essex, RM3 9ND

01708 343 065

[www.retford-dental.co.uk](http://www.retford-dental.co.uk)

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