



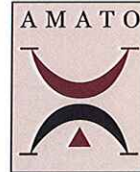
## A WIN-WIN SITUATION!

Take this coupon with you when you visit your family dentist for your regular hygiene appointment. Have your hygienist fill it out for you and send or bring it back to Dr. Amato's office.

YOU AND YOUR HYGIENIST WILL BOTH BE ENTERED IN OUR "WIN-WIN CONTEST"

Winners will be notified!

*Don't forget - your smile  
will be a winner too!*



ORTHODONTICS

17 EAST WALDO BOULEVARD  
MANITOWOC, WI 54220

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**FILL OUT THIS FORM AND RETURN TO OUR OFFICE  
TO WIN A GREAT PRIZE FOR BOTH OF YOU!**

Patient's name: \_\_\_\_\_

Phone number: \_\_\_\_\_

Date of hygiene visit: \_\_\_\_\_

Hygienist's name: \_\_\_\_\_

Office of Dr.: \_\_\_\_\_

Hygienist signature: \_\_\_\_\_