

CLIENT DETAILS			
Full or Legal Name:		ACN: ABN:	
Trading Name: if different to above		AHPRA #	
Phone:		Email:	
Practice Address:			
Additional Location:			

Terms and Conditions for All-on-X Cases

Thank you for choosing our Dental services for your All-on-X procedure. To ensure clarity and mutual understanding, please read the following terms and conditions carefully:

Payment Schedule:

Initial Payment: A deposit of 50% of the total cost is required upfront before the commencement of the All-on-X procedure. This payment secures your procedure plan and allows us to prepare for your treatment.

Final Payment: The remaining 50% of the total cost is due in full at the final stage of the procedure. This final payment must be completed before the delivery of the final procedure.

Cancellation and Refund Policy:

Cancellation by Practitioner: If you need to cancel your procedure, please notify us as soon as possible. Cancellations made less than 72 hours before the scheduled procedure may result in forfeiture of the deposit.

Refunds: Refunds of the initial deposit are subject to the terms of our cancellation policy. If we cancel the procedure for any reason, you will be entitled to a full refund of the deposit.

Treatment Warranty:

Our All-on-X procedures come with a standard warranty covering the prosthesis and implants. The specifics of this warranty, including duration and coverage, will be discussed during your procedure.

Communication:

By proceeding with the All-on-X procedure, you acknowledge that you have read, understood, and agreed to these terms and conditions. If you have any questions or concerns, please do not hesitate to contact our office.

Thank you for your trust in our Dental services.

Authorisation	
Signature	
Position	
Date	