



ADOPT A YETI PROGRAM

Valeri Orthodontics is proud to introduce our “Adopt a Yeti” program to our southeastern Wisconsin community. Our goal is to raise money for Children’s Wisconsin and to provide free orthodontic care to child cancer survivors. All proceeds from yeti plush adoptions will go directly to Children’s Wisconsin. In addition, for every 100 yeti plushies that are adopted, Valeri Orthodontics will donate free orthodontic care to a child cancer survivor from our community.

QUALIFICATIONS:

- 18 years or younger
- Have undergone and completed cancer treatment
- A moderate to severe need for braces
- Clearance from their dentist and from their physician
- Excellent oral hygiene with no cavities
- Currently not in braces



HOW TO APPLY:

- Please complete the following application forms.
- Each application will be carefully reviewed by a review panel. Your family will be notified if your child is approved for the program or if your child will need further evaluation due to dental development or any other extenuating circumstances (i.e. your child may not be ready for treatment due having a significant amount of baby teeth; your child is not in the proper growth development stage). The availability of treatment is limited and if your child qualifies but is not accepted initially, they may be placed on a waiting list if they qualify for the program.
- Please email completed applications to info@valerortho.com or mail to Valeri Orthodontics, 9020 76th St. Ste B, Pleasant Prairie, WI 53158.



ADOPT A YETI PROGRAM

APPLICANT INFORMATION:

First Name

Last Name

Middle Initial

D.O.B.

Gender

Full Address

PARENT/GUARDIAN INFORMATION:

First Name

Last Name

Phone Number

Email Address



ADOPT A YETI PROGRAM PHYSICIAN CLEARANCE

Valeri Orthodontics is proud to introduce our "Adopt a Yeti" program to our southeastern Wisconsin community. Our goal is to raise money for Children's Wisconsin and to provide free orthodontic care to child cancer survivors. All proceeds from yeti plush adoptions will go directly to Children's Wisconsin. In addition, for every 100 yeti plushies that are adopted, Valeri Orthodontics will donate free orthodontic care to a child cancer survivor from our community.

Please complete the following form to ensure that the applicant is cleared for orthodontic treatment.

Physician Name

Clinic/Hospital Name

Clinic/Hospital Address

Phone Number

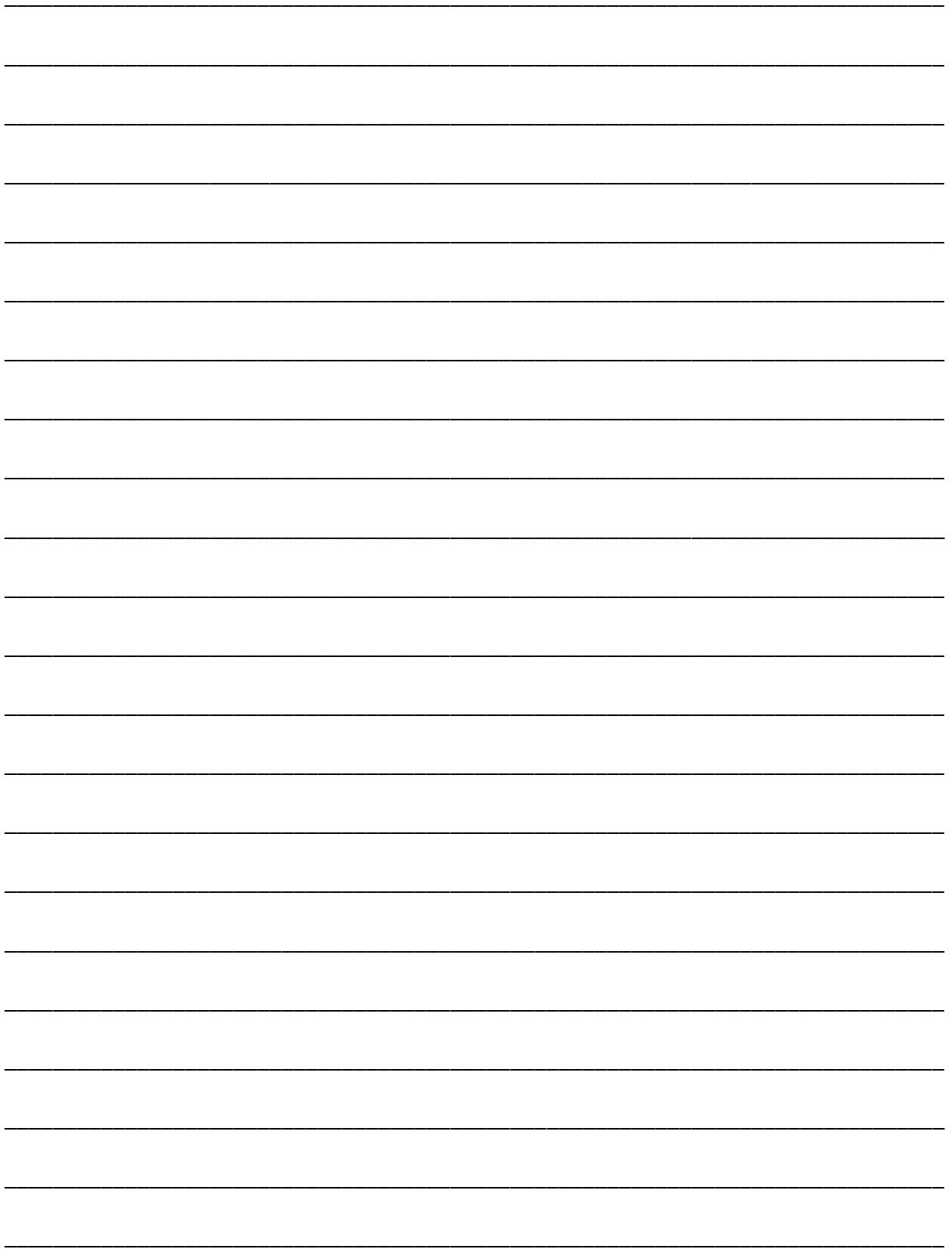
Email Address

Is applicant in remission and cleared for orthodontic treatment? YES NO

I hereby certify that _____ is in adequate health to undergo orthodontic treatment.

Physician Signature

Date





ADOPT A YETI PROGRAM PROGRAM GUIDELINES

Please thoroughly read and initial the following program guidelines.

_____ Participation in the “Adopt a Yeti Program” is limited and not every applicant will be accepted into the program. Valeri Orthodontics cannot guarantee that an applicant will qualify or be accepted into the program.

_____ The “Adopt a Yeti Program” at Valeri Orthodontics is for one phase of orthodontic treatment only. Multiple phase treatments and relapse treatments are not included.

_____ Auxiliary dental work including extractions, fillings, cleanings, or oral surgery that may be necessary for the applicant’s orthodontic treatment are not included in the “Adopt a Yeti Program”; these procedures are the financial responsibilities of the applicant family, and you should make arrangements with your general dentist or oral surgeon.

_____ If the patient moves during active orthodontic treatment, please contact Valeri Orthodontics to discuss your options. Braces can be removed for the patient at Valeri Orthodontics, or you can seek to continue your treatment with an orthodontist in your new area. If you decide to continue or restart orthodontic treatment with a new provider, the “Adopt a Yeti Program” does not transfer, and financial arrangements will need to be made with your new provider.

_____ The “Adopt a Yeti Program” covers metal braces only. Clear braces or Invisalign (clear aligners) are not included. The “Adopt a Yeti Program” will provide one set of removable

retainers for the patient; lost or broken retainers that require replacement will incur a replacement fee.

_____ The “Adopt a Yeti Program” relies on patient cooperation including not missing scheduled appointments, maintaining excellent oral hygiene, being compliant with elastics, and avoiding appliance breakage. Missed appointments, non-compliance, disrespectful behavior, poor hygiene, or excessive breakage could lead to out-of-pocket expenses and/or dismissal from the program. If you wish to continue treatment with a different orthodontic office after dismissal, financial arrangements will have to be made with the new office.

_____ If the applicant is accepted into the “Adopt a Yeti Program”, the applicant and applicant’s parent or guardian consent to use of the applicant’s photographs, videos, or any other media to be used by Valeri Orthodontics in promotional situations, fundraising, advertising, professional lectures, or any other promotional situations.

I agree to comply with all program guidelines listed above. I also certify that all preceding information is correct and truthful, and that misrepresentation will lead to immediate dismissal from the program.

Parent/Guardian Signature

Date