

# Garden Dental Merry Makeover - Official Entry Form

**Please complete all required fields.** Please attach a picture of your face, showing your full smile, straight on. You don't need to be a patient of Garden Dental & Orthodontics to enter this giveaway, but you must be a resident of the Greater Parkland Area, and be able to travel to Spruce Grove for treatment. **ALL ENTRIES MUST BE RECEIVED BY MIDNIGHT ON NOVEMBER 5, 2020**

First Name		Last Name	
Phone		Email	
Address			
City	Province		Postal Code
Age		Occupation	

Tell us your story. What challenges have you faced? How has your smile affected your life, and how would a new smile change that? If you win the Merry Makeover, what do you look forward to most once you have a new smile?

Are you currently a patient at Garden Dental & Orthodontics?  Yes  No

- I confirm that I am a legal resident of Canada
- I confirm that I am 18+ years old
- I confirm that I have read, and will abide by, the Official Rules of the Merry Makeover

FULL NAME	DATE
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Please email the completed entry form (as well as a picture showing your full smile), to [merrymakeover@gardendental.ca](mailto:merrymakeover@gardendental.ca)  
Entries can also be dropped off at Garden Dental & Orthodontics, 306 McLeod Ave, Spruce Grove