

BARNETT
ORTHODONTICS

AMERICAN SMILES ENTRY FORM
2014-2015



What to Do:

- Fill out the entry form
- Attach a favorite photo of yourself showing off your great smile!
- Finalists will get a chance to share “What Makes Me Smile!” in an individual filmed interview
 - Interviews will be posted on Facebook & YouTube for voting
- Invite your friends, family, school, or neighbors to: Like, Share, Comment, View to VOTE FOR YOU!!

The Winners Will Receive:

- THE TITLE & TROPHY OF AMERICAN SMILES WINNER!
- A PROFESSIONAL PHOTO SHOOT!
- A PROFESSIONAL VIDEO & COMMERCIAL SHOOT!
- YOUR SMILE SHOWN IN AMERICAN SMILES “HALL OF FAME” & ON MARKETING MATERIALS!!

**ATTACH
PHOTO**

Patient Name: _____
 Address: _____
 City _____ State _____ Zip _____
 Phone #: () - _____
 Age: _____
 Grade: _____
 School: _____



American Smiles Entry Form
What Makes Me Smile?

- My favorite food is:**
- The best book I've read is:**
- A great weekend for me includes:**
- My favorite color is:**
- My dream vacation spot would be:**
- My most prized possession is:**
- If I could be on any reality TV show I would choose:**
- My favorite animal is:**
- One word that describes me is:**
- The thing I am most proud of about myself is:**
- The one thing I could never live without would be:**
- My favorite movie is:**
- My hero or role model is:**
- If I could change one thing in the world it would be:**
- The thing that makes me smile most is:**

Terms & Conditions

All contestants must be *currently in treatment or prior patients* who have completed treatment with Barnett Orthodontics. It is the responsibility of the semi-finalists and finalists to gain the support of family and friends. All submissions must be completed by deadline. By submitting the American Smiles entry form the patient agrees to release the above information to Barnett Orthodontics in its entirety for the use of the American Smiles competition at the discretion of Barnett Orthodontics. This Includes but is not limited to, photos, videos, general information, and questionnaire entry information; also authorizing the publishing of photographs, videos, general information, and leisure questionnaire information on social media websites, promotional items, distribution material, Barnett Orthodontic website, etc. Winners will be contacted privately prior to the public announcement, and will be given the opportunity at that time to opt out is he or she chooses. Winners will receive professional photography and videography that is not available for resale.

I, _____, as the patient or parent/guardian agree to these terms and conditions.

Patient Signature: _____

Parent or Guardian Signature (if under 18): _____

Entry Forms may be turned in to the office in person, by mail, fax, or email by **Monday January 5, 2015.**

Email: barnettsmiles@aol.com

Fax: 512.343.0455

Barnett Orthodontics

Attn: American Smiles

7800 N Mopac Exp Suite 325

Austin, TX 78759