

26 Years and the Positive Impact Is Undeniable

ALPHA OMEGA DENTAL VOLUNTEER PROGRAM

This year marks over 25 years for this remarkable program. For over a quarter century, Alpha Omegans have generously provided much needed dental services. Jewish Family and Child Service would once again like to honor your participation in the Alpha Omega volunteer program this year by placing an advertisement in the Canadian Jewish News. This ad will list your name along with all the other participants in the program. If you wish to volunteer but not have your name placed in the advertisement, please initial the volunteer form where this option is available. For the past **twenty seven years**, the Alpha Omega Dental Volunteer program has asked Alpha Omegans to treat people in the community who were in need of dental work. These patients are referred to us from Jewish Family and Child Service. The Jewish Family & Child/Alpha Omega Coordinator, Jaime Justiz describes the typical client as “having limited income who without help from Alpha Omega would find dental services difficult to obtain.” The program has been a great success with over one thousand people being treated over the last **twenty seven years**. The services covered are basic restorative and preventative procedures as well as removable prosthesis and some specialty services. This is a much needed and greatly appreciated program but success depends on Alpha Omegans who are willing to volunteer or re-volunteer to treat one or two patients a year in their office. We are counting on you to continue your support no matter where your office is located.

Daniel J. Pollit & Jaime Justiz

PLEASE TURN OVER TO COMPLETE THE VOLUNTEER FORM

ALPHA OMEGA DENTAL VOLUNTEER PROGRAM

Yes, I would like to participate in the Alpha Omega Dental Volunteer Program

NAME _____

OFFICE ADDRESS _____

NEAREST MAJOR INTERSECTION _____

OFFICE PHONE NUMBER _____

E-MAIL _____ FAX _____

I AM A GENERALIST _____ SPECIALIST _____ SPECIALTY _____

ARE YOU PRESENTLY STILL TREATING A PATIENT FROM THIS PROGRAM?

YES

NO

I give Jewish Family and Child Service permission to include my name in advertising placed in the Canadian Jewish News. _____ (Please initial)

I would prefer Jewish Family and Child Service not include my name in advertising placed in the Canadian Jewish News. _____ (Please initial)

Please, return by mail or fax to:

Dr. Daniel Pollit
1670 Dufferin Street #208
Toronto, Ontario
M6H 3M2
Fax: 416-491-0330