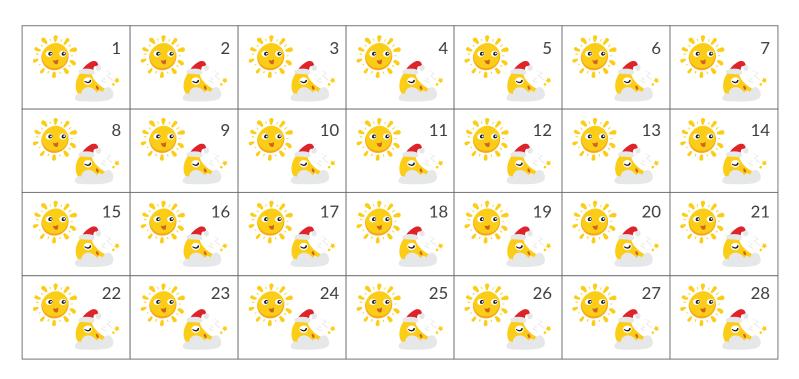
## **BRUSH-TO-WIN CALENDAR**



Start Date: End Date:



## To participate in the Springbank Dental Centre Brush to Win Contest:

Place a sticker or checkmark on the:	when you brush in the morning,	when you brush at night.

Student's Name:		(	Grade:
Teacher's Name:			
School Name:			
I, the parent/guardian of <student name=""></student>			give Springbank Dental
Centre permission to publish my child's first na	me, photo, and sch	ool on the Sandstone Denta	al website if my child wins
a prize in the Brush to Win contest:			
	) <b>Yes</b>	No	
Parent/Guardian Name		Parent/Guardi	an Signature