

Date Taken: _____



SMARTGUARDS

1011 Upper Middle Road East
Suite 1443
Oakville, Ontario
L6H 5Z9
tel: 905 257 8574
toll free: 1-877-257-8574
email: sales@smartguards.ca

DDS: _____

PATIENTS NAME: _____

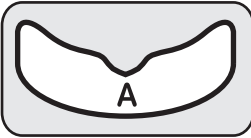
DATE OF BIRTH: _____

OFFICE ADDRESS: _____

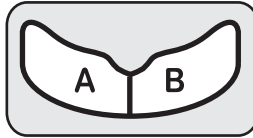
TELEPHONE: _____

Choose Style and Colour of Your Mouthguards

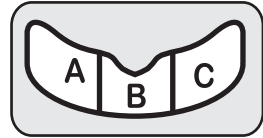
Style 1 - Single Colour



Style 2 - Double Colour



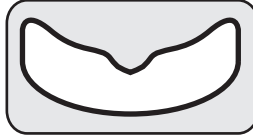
Style 3 - Triple Colour



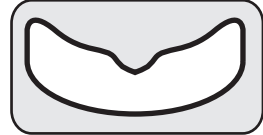
Style 4 - Canadian Flag



Style 5 - Marble

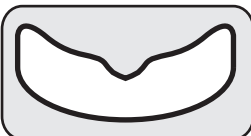


Style 6 - Dalmation



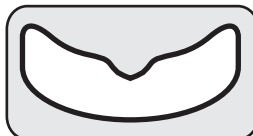
*3 Colour Dots.

Style 7 - Fangs



*Colours not adjustable

Style 8 - Cyclops



*Colours not adjustable

Style 9 - Team



Please choose COLOURS

Style _____



A _____

B _____

C _____

D _____

Notes / Comments