

Third Party Guarantor Agreement

In consideration of the services provided by Kenneth M. Sadler, DDS and Associates, PA, Winston-Salem Dental Care (**WSDC**) to _____ (**Patient**)

I, _____ (**Guarantor**) hereby agree to be jointly and severally liable for, any and all of **the Patient's** financial liability to **WSDC** arising as a result of services provided by **WSDC**. **Guarantor** further expressly guarantees payment for services to the **Patient**, administrative charges, including without limitation attorney fees, court costs, or any other liability incurred from attempts to collect from the **Patient** by **WSDC**.

Guarantor's obligation under this Agreement shall extend and apply with respect to the full and faithful performance of services by **WSDC** to the **Patient**.

This Agreement constitutes a legally binding contract enforceable by law. The undersigned co-signs as **Unconditional Guarantor** for the **Patient**.

GUARANTOR'S INFORMATION

Name (Print) _____

Address _____

City _____

State _____

Telephone _____

Soc. Sec. No. _____

Signature _____

Date _____

PATIENT'S INFORMATION

Name (Print) _____

Address _____

City _____

State _____

Telephone _____

Soc. Sec. No. _____

Signature _____

Date _____