

# Save up to \$100

on your *Restylane*<sup>®</sup> or *Perlane*<sup>®</sup> treatment!

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Email \_\_\_\_\_

Number of box tops enclosed:

1 for \$50 rebate check   or    2 for \$100 rebate check

By signing below, I agree to receive special offers and information about the *Restylane*<sup>®</sup> family of products.

Signature \_\_\_\_\_

By signing this form, you permit Medicis Aesthetics Inc. ("Medicis") to use the information you provide in this form to communicate with you about products, programs and services. Medicis may share information about you with service providers, government authorities or as required by law or legal process. Medicis will not sell your name. To be removed from this mailing list, you may call 800-211-6794.

## **Restylane**<sup>®</sup> Rebate Redemption Form

For a limited time only, you can receive a \$50 rebate on one 1 mL syringe or a \$100 rebate on two 1 mL syringes of *Restylane*<sup>®</sup> or *Perlane*<sup>®</sup>. Offer expires October 31, 2008. Certain restrictions apply. See Offer Terms and Conditions for details.

## **How to receive your rebate.**

Simply complete this form with your information. Then mail it, along with the *Restylane*<sup>®</sup> or *Perlane*<sup>®</sup> box tops (limit 2) and purchase receipt, to:

*Restylane*<sup>®</sup> Rebate  
P.O. Box 6422  
West Caldwell, NJ 07007-6422

*Restylane*<sup>®</sup>  
redefining beauty<sup>®</sup>

## **Offer Terms and Conditions**

This rebate may be applied to your purchase of *Restylane*<sup>®</sup> or *Perlane*<sup>®</sup> at regular market price. This offer is limited to a \$50 rebate for one 1 mL *Restylane*<sup>®</sup> or *Perlane*<sup>®</sup> syringe or \$100 for two 1 mL *Restylane*<sup>®</sup> or *Perlane*<sup>®</sup> syringes with a maximum redemption of \$100. This offer is limited to one rebate per person. You may use this voucher only if you paid for your entire treatment yourself and if no part of your treatment was covered by insurance or another third-party payor. You may not use this voucher if you receive any treatment using a Medicis Aesthetics Inc. product that is reimbursed by Medicaid, Medicare, or other federal or state benefit programs, including state medical assistance programs. You may not use this voucher if your private insurance, HMO, or other health benefit program paid for all or part of your treatment. If any form of reimbursement is sought from a third-party, you may be required to disclose the value of this rebate to that party. To qualify for the offer, you must submit a receipt from your practitioner for your treatment and the end flap(s) with the proof-of-purchase hologram from the *Restylane*<sup>®</sup> or *Perlane*<sup>®</sup> box(es) used in your treatment. Medicis Aesthetics Inc. cannot accept credit card receipts when processing your rebate. Providing the end flap(s) with the proof-of-purchase hologram from the *Restylane*<sup>®</sup> or *Perlane*<sup>®</sup> box(es) is for your protection. This ensures that you have received genuine FDA-approved *Restylane*<sup>®</sup> or *Perlane*<sup>®</sup>. The *Restylane*<sup>®</sup> or *Perlane*<sup>®</sup> syringes used in your treatment must be purchased legally in the U.S. Submissions must be postmarked by October 31, 2008. By submitting this request, you agree to all of the rules and conditions of this offer. Medicis Aesthetics Inc. reserves the right to cancel or modify this offer without notice. This offer is available only to patients, excluding claims from Medicis Aesthetics Inc. employees and their families or employees of its dealers and distributors. This offer is non-transferable. Fraudulent submissions could result in prosecution. Offer void where prohibited by law, taxed, or otherwise excluded. Offer only good in the U.S. Your rebate check will be issued in U.S. Dollars only. All requests become the property of Medicis Aesthetics Inc. and will not be returned. Medicis Aesthetics Inc. assumes no responsibility for lost, late, damaged, misdirected, misaddressed, incomplete, or postage-due requests that fail to be properly delivered to the address stated for any reason. If you do not receive your rebate check within six to eight weeks, please call toll free 800-221-6974. Please keep a copy for your records.

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