FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|-------------|------|-------|
| | | |

| STATEMENT | OF CHANGES I | IN BENEFICIAL | OWNERSHIP |
|------------------|--------------|---------------|------------------|

| OMB APPRO | JVAL |
|------------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average burd | en |
| hours per response: | 0.5 |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Eychange Act of 1934

| mon doc | .0 2(0). | | | 1 110 | | ction 30(h) of the Ir | | | | | 704 | | | | |
|--|----------|-----|--|---------|---|---|--|--|--------------|--------------------|----------------|---------------------------|---|---|---------------------------|
| 1. Name and Address of Reporting Person* BREELAND JOE | | | | | | 2. Issuer Name and Ticker or Trading Symbol ALIGN TECHNOLOGY INC [ALGN] | | | | | | | ip of Reportin plicable) ector cer (give title | g Person(s) to I | |
| (Last) (First) (Middle) C/O ALIGN TECHNOLOGY INC 801 MARTIN AVE | | | | | | e of Earliest Transa 3/2003 | action (M | lonth/ | Day/Year) | | | below) VP of Sales | | | |
| (Street) SANTA CLARA CA 95050 (City) (State) (Zip) | | | | | | mendment, Date of | f Origina | I Filed | l (Month/Day | //Year) | | ne) X For For | m filed by One | o Filing (Check A e Reporting Pers re than One Rep | son |
| | | Tab | le I - No | n-Deriv | ative S | Securities Acq | uired, | Dis | posed of | , or Bei | neficia | ally Owr | ed | | |
| | | | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | d Secu Bene | icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | Code | v | Amount | (A) or (D) Prid | | Trans | action(s) 3 and 4) | | (11301. 4) |
| Common Stock 11/03/ | | | | /2003 | 11/03/2003 | S | | 25,000 | D | \$16. | 06 | 0 | I | JTWROS with spouse | |
| Common Stock | | | | | | | | | | | | 73,985 | I | Jt. Ten with spouse | |
| Common Stock | | | | | | | | | | | | 1 | 79,493 | D | |
| | | Ta | | | | curities Acqui lls, warrants, | | | | | | y Owned | I | | |
| 1. Title of 2. 3. Transaction 3A. Deemed 4. Derivative Conversion Date Execution Date, 1 | | | | | | | 6. Date Exercisable and Expiration Date 7. Title and Amount of | | | | | 8. Price of Derivative | | | 11. Nature of Indirect |

| Security (Instr. 3) | or Exercise Price of Derivative Security | (Month/Day/Year) | if any (Month/Day/Year) | Code (Instr. 8) | | Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | (Month/Day/Year) | | Securities Underlying Derivative Security (Instr. 3 and 4) | | Security (Instr. 5) | Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
|------------------------|---|------------------|----------------------------|-----------------|---|--|-----|---------------------|--------------------|--|--|------------------------|--|--|---------------------------------------|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

Joe Breeland

11/04/2003

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.