



**How did you hear about us?**

\_\_\_\_ Billboard

\_\_\_\_ Referred by existing patient. Who may we thank for referring you to our practice? \_\_\_\_\_

\_\_\_\_ Welcome Wagon

\_\_\_\_ Upstate Greetings

Phone Book:

\_\_\_\_ Yellowbook    \_\_\_\_ The Real Yellow Pages    \_\_\_\_ The Talking Phone Book    \_\_\_\_ Piedmont /Golden Strip Directory

\_\_\_\_ Sportsclub

\_\_\_\_ YMCA

\_\_\_\_ Website

Friendship has its benefits...Did you know that for every new patient you refer to our practice, your name will be entered into our quarterly "refer a friend" drawing? This quarter's drawing is for a \$50 gift card to Bone Fish grill!

**Our Goal is to Make Every Visit as Comfortable and Pleasant as Possible, please tell us a little more about you.....**

Do you feel nervous about having dental treatment? \_\_\_\_\_ YES/ NO

Have you ever had an unfavorable reaction from a local anesthetic? YES/ NO

Have you been treated with Orthodontics in the past? \_\_\_\_\_ Has it relapsed? \_\_\_\_\_

Do you want straighter teeth? \_\_\_\_\_ YES /NO

Are you dissatisfied with the appearance of your teeth? \_\_\_\_\_ YES /NO

Do you want whiter teeth? \_\_\_\_\_ YES /NO

Is there anything else about having dental treatment that bothers you? Or is there anything that you would like to specifically address about the appearance or health of your smile?

---

---

May we contact you by e-mail? Email Address: \_\_\_\_\_