



Welcome to Our Office!

Name: _____ Date: _____

Our practice is here to provide our patients with the best orthodontic treatment available today, but our patients are also our friends. If you would, please answer these questions so that we may get to know you better.

Do you have a nickname you would prefer us to call you? _____

Are you originally from this area? _____

What school do you attend? _____ Does your mother do your homework for you? _____

What is your favorite subject in school? _____

What is your favorite sport? _____ What is your favorite team? _____

Have you ever been on TV or ESPN? _____ May I have your autograph? _____

What are your hobbies? _____

Do you have any pets? _____ What type? _____ Their name(s)? _____

Do you play a musical instrument? _____ Would you like to join the Lach Orthodontic Band? _____

What kind of music do you like? _____ Do you sing to yourself in the shower? _____

What is your favorite radio station? _____

What type of movies do you like? _____ What theater do you go to? _____

What type of books do you like? _____ What else do you like? _____

Do you know anyone else that comes to our office? _____

What are their names? _____

Do you own a computer? _____ What is your e-mail address? _____

We look forward to meeting you personally.
Please bring these completed forms with you to your new patient appointment.
See you soon!

THANK YOU FOR YOUR TIME

"Creating Smiles for Success..... all over Our Community!"