



# Parisi Orthodontics

charting the course to exceptional smiles 

## How Did You Find Us?

Date: \_\_\_\_\_

Patient Name: \_\_\_\_\_

Parent / Legal Guardian Name: \_\_\_\_\_

General Dentist: \_\_\_\_\_

What or who was the #1 referral source that brought you to us?

\_\_\_\_\_

*Our office has a wonderful referral program full of fun rewards!  
Please check other sources that may have influenced you to come to Parisi Orthodontics:*

- Dentist \_\_\_\_\_
- Friend (s) \_\_\_\_\_
- Family Member \_\_\_\_\_
- School talk, teacher, or nurse \_\_\_\_\_
- Phone Book
- Postcard
- Parisi Orthodontics staff member \_\_\_\_\_
- Internet
- Magazine or newspaper
- Parisi Orthodontics Sign
- Other \_\_\_\_\_

Thank you!