DR. A.B. HAMMOND

Practice Limited to Orthodontics

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New Patient Welcome Questionnaire

WELCOME
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 the questions below so that we may get to know you better.
What name (or nickname) do you like to be called by?
Are you originally from this area?
What kind of music do you like, and who are your favorite performers or groups?
What type of books or movies do you like?
What type of sports do you like?
Do you have any pets? If so, what kind?
What subject do you like most if attending school?
What are your hobbies and what type of things do you like to collect?
What else do you like to do with your spare time?
Please list the names of any of your friends or relatives who come to our office.

THANK YOU.