

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.

What name (or nickname) do you like to be called by? \_\_\_\_\_

Are you originally from this area? Yes/No

If no, where are you from originally? \_\_\_\_\_

Where do you work? \_\_\_\_\_

What are your hobbies? \_\_\_\_\_

What is your favorite sport? \_\_\_\_\_

What is your favorite professional sports team? \_\_\_\_\_

What is your favorite college team? \_\_\_\_\_

What is your favorite radio station? \_\_\_\_\_

Do you own a computer? \_\_\_\_\_ What is your E-mail address? \_\_\_\_\_

Have you visited our web site at [www.lach-ortho.com](http://www.lach-ortho.com)? Yes/No

Have you seen the Lach Billboard? Yes/No

Do you like movies? Yes/No What theater do you go to? \_\_\_\_\_

Do you have pets? Yes/No What type? \_\_\_\_\_ Their names? \_\_\_\_\_

Do you know anyone else who comes to our office? Yes/No

List their names \_\_\_\_\_

THANK YOU FOR YOUR TIME.

David R. Lach, DDS, MS, PA  
Specialist in Orthodontics and Dentofacial Orthopedics

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[www.lach-ortho.com](http://www.lach-ortho.com)

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



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