

Atlanta Dentures

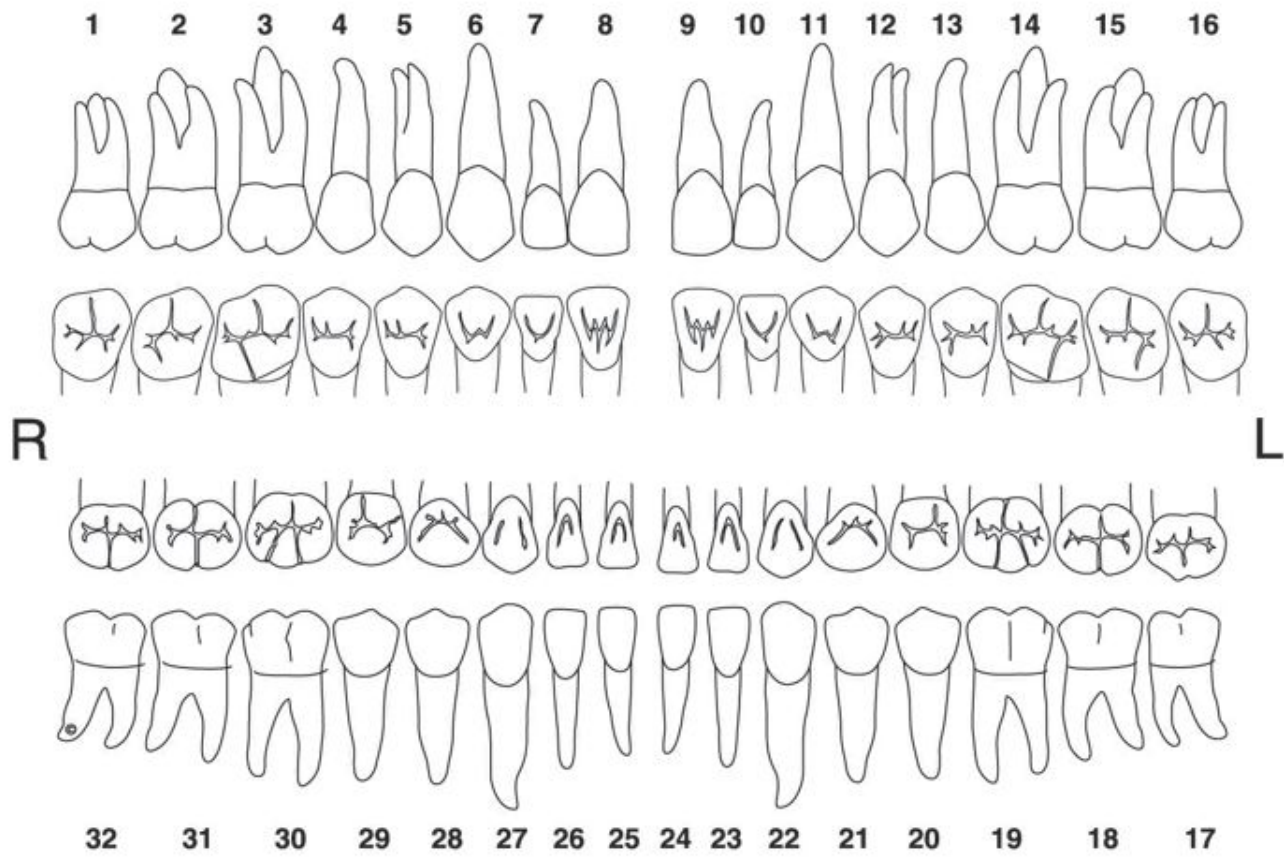
Introducing: _____

D.O.B.: _____ Phone Number: _____

Patients under the age of 18 should be accompanied by parent or guardian.

Referred By Dr: _____

Office Number: _____



X-Rays

- Being Mailed
- Given to Patient
- Return to Us
- Duplicates- Do Not Return
- No X-Ray Available

Treatment Requested:

- Consultation and Diagnosis
- Extractions
- Sedation
- Implants
- Denture
- Other: _____

Comments: _____

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