

# STEP 1



Dental care is an important part of a happy and healthy lifestyle. At Schultz Family Dental, we aim to offer our patients the best care possible. We are happy to offer the following financing options to help make your dental payments easy and convenient.

New Patient Forms – Download [Here](#)

Download and fill out our patient forms before your appointment and submit them to our office!

First Name

Last Name

Email

Choose File No file chosen

SEND MESSAGE

SUBMIT >

Preventive +

Restorative +

Cosmetic +

Schedule Now >

## Instructions

- Click "Download Here" to open the form.
- In the upper right hand corner, hover and click the down arrow to download the form onto your computer.
- Open the file on your computer, fill out accordingly, and save changes to your

# STEP 2

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As required by law, our office adheres to written policies and procedures to protect the privacy of information about you that we create, receive, or maintain. Your answers are for our records only, and will be kept confidential, subject to applicable laws. You may be asked additional questions about your responses, as such information is vital to provide appropriate care.

### Patient Information

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Preferred Name: \_\_\_\_\_  
Marital Status (please circle): Married Single Divorced Separated Widowed  
Home Phone: (\_\_\_\_) \_\_\_\_\_ Business/Cell Phone: (\_\_\_\_) \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Preferred Method of Contact (please circle): Home  Work  Cell  Email   
Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Home Phone: (\_\_\_\_) \_\_\_\_\_ Business/Cell Phone: (\_\_\_\_) \_\_\_\_\_



# STEP 3

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on

First Name:  Middle Initial:  Last Name:

Preferred Name:

Marital Status (please circle): Married Single Divorced Separated Widowed

Home Phone: (  )  Business/Cell Phone: (  )

# STEP 4

Dental care is an important part of a happy and healthy lifestyle. At Schultz Family Dental, we aim to offer our patients the best care possible. We are happy to offer the following financing options to help make your dental payments easy and convenient.

Preventive

Restorative

Cosmetic

## New Patient Forms – Download Here

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Schedule No

First Name  Last Name

email@email.com   No file chosen

SEND MESSAGE

SUBMIT >

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# STEP 5

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Preventi

Restorat

Cosmeti

## New Patient Forms – Download Here

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**SEND MESSAGE**

SUBMIT >

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