



**BROOKS**  
ORTHODONTICS

embrace  
your smile

**PATIENT INFORMATION**

7684 6/17

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

Name: \_\_\_\_\_  
LAST FIRST MIDDLE

Address: \_\_\_\_\_  
STREET CITY STATE ZIP

Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Parent/Guardian Name: (If patient is a minor): \_\_\_\_\_

Patient Email: \_\_\_\_\_ Responsible Party Email: \_\_\_\_\_

**RESPONSIBLE PARTY INFORMATION**

Name: \_\_\_\_\_  
LAST FIRST MIDDLE

Home Address: \_\_\_\_\_  
STREET CITY STATE ZIP

Mailing Address: \_\_\_\_\_  
STREET CITY STATE ZIP

How long at this address? \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
(If less than 3 years)

Previous Address: \_\_\_\_\_  
STREET CITY STATE ZIP

DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Relationship to Patient: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_ # Yrs Employed: \_\_\_\_\_

Spouse: \_\_\_\_\_ Relationship to Patient: \_\_\_\_\_

Spouse's Employer: \_\_\_\_\_ Spouse's Occupation: \_\_\_\_\_ Spouse's # Yrs Employed: \_\_\_\_\_

Spouse's DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Spouse's SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**INSURANCE INFORMATION**

Insured's Name: \_\_\_\_\_ Insured's DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Insured's SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Insurance Co.: \_\_\_\_\_ Group #: \_\_\_\_\_ Local #: \_\_\_\_\_

Insurance Co. Address: \_\_\_\_\_

Do you have dual coverage?   If yes, please continue.

Insured's Name: \_\_\_\_\_ Insured's DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Insured's SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Insurance Co.: \_\_\_\_\_ Group #: \_\_\_\_\_ Local #: \_\_\_\_\_

Insurance Co. Address: \_\_\_\_\_

Insured's Employer: \_\_\_\_\_

**EMERGENCY INFORMATION**

Nearest relative not living with you: \_\_\_\_\_

Complete Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship to Patient: \_\_\_\_\_

Signature (Parent, if minor): \_\_\_\_\_ Date: \_\_\_\_\_

I understand that where appropriate, credit bureau files may be obtained.

