LET'S TALK! DENTAL PRESENTATION INVITATION

I am a patient of Goshgarian Orthodontics

and a member of their Kids Reward Club Program. I would like my orthodontist to come to our class and teach us how to take care of our teeth. The following information will allow my orthodontist to contact you and schedule a good time to visit.



Patient Signature

CONTACT INFO

Organization Name	
Organizer's Name	Age Group
Please indicate the best way for my orthodontist to reach you	
Person to Contact	
Best number to call	
Bost day and time to reach you	