

## REGISTRATION CHILD

|   |                |              |
|---|----------------|--------------|
| _____   | _____          | _____        |
| surname   | street, number | e-mail       |
| _____ <input type="radio"/> m <input type="radio"/> f | _____          | _____        |
| first name  | post code      | phone        |
| _____   | _____          | _____        |
| date of birth/city                                    | city           | mobile phone |
| _____   | _____          | _____        |
| pediatrician  | phone          |              |

Where is your child insured?

mother  father

How is your child insured?

legally  private

Is your child extra insured?

yes  no

How did you hear about our practice?

\_\_\_\_\_

Transfer by

\_\_\_\_\_

What is the cause of your dental visit?

\_\_\_\_\_

Do you want a reminder of your treatment appointment?

yes  no

How do you want a notification before an agreed date?

sms  e-mail

Is it the first visit of a dental doctor for your child?

yes  no

How does your child think about a dentist?

neutral  positive  negative

Is or was your child sucking on her / his thumb?

yes  no

How long?

\_\_\_\_\_

Did your child get the bottle?

yes  no

How long?

\_\_\_\_\_

What does your child drink during the day?

Did your child get a dummy?

yes  no

How long?

Is your child in an orthodontic treatment?

yes  no

Name and phone number / orthodontist

\_\_\_\_\_

## legal guardian

|                    |                |             |
|--------------------|----------------|-------------|
| _____              | _____          | _____       |
| surename           | street, number | e-mail      |
| _____              | _____          | _____       |
| first name         | post code      | phone       |
| _____              | _____          | _____       |
| date of birth/city | city           | mobil phone |

\_\_\_\_\_

Cologne date of

Failure to meet deadlines, without sufficient time prior cancellation (24 hours), the resulting loss of fees will be charged.

\_\_\_\_\_

Signature (legal guardian)