What's most important to YOU?

So that we can personalise your orthodontic treatment please rank your top three (1-3) in the boxes below (1 being most important)

Aesthetics: I would prefer people don't notice I'm in orthodontic treatment	
Comfort: I want to be as comfortable as possible during treatment	
Visit frequency: I want as few visits as possible	
Time in treatment: I want a beautiful smile as quickly as possible	
Treatment cost: I want cost effective treatment	
Schedule: I would like appointments before or after work/school	
Punctuality: I want to be seen on time	

How did you find us?

Please tick how you found us (as many boxes as applicable)

- □ Google
- 🗆 Radio
- Newspaper
- Cinema
- Referred by dentist______
- Referred by other ______
- □ Direct mail (flyer)
- □ Sign
- □ Social media
- □ Brookwater Dental Study Group
- □ School Dental Brochure/ Orthodontist locator
- School/Community event ______
- Other_____

Than	ks!	!!	ļ
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