



WHITBY ORTHODONTICS

DR. RONALD L. SPERBER
DR. DAVID J. SIMONE
Certified Specialists in Orthodontics

*Serving Whitby and
Durham Region for over 2 decades*

Patient's Name _____ Referred By: _____

Congratulations! Your first visit has been scheduled.
The following appointment date and time is reserved for you:

Day Date Time

For Orthodontic Evaluation

- | | |
|---|--|
| <input type="checkbox"/> To improve the smile | <input type="checkbox"/> To aid in replacing missing teeth |
| <input type="checkbox"/> To improve the bite | <input type="checkbox"/> To correct impacted teeth |
| <input type="checkbox"/> To improve gum tissue health | <input type="checkbox"/> Other _____ |

Remarks: _____

We are looking forward to meeting you!
If you have any questions please do not
hesitate to call our office or visit our
website:

www.whitbyorthodontics.com

Our Office Hours:

Monday - Thursday
8:30 am to 5:00 pm

Friday
9:00 am to 1:00 pm

214 - 1614 Dundas St. E.,
Whitby, ON L1N 8Y8

Tel: (905) 725-9530 Fax: (905) 725-5087

www.whitbyorthodontics.com

