



Great Beginnings

Pediatric & Adolescent Dental Specialists

Board Certified

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Angela P. Baechtold, DDS, MS, PA, Diplomate
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It's all about you!

Nickname _____ Age _____

My hobbies are _____.

I have a pet _____ and its name is _____.

My favorite movie or TV show is _____.

My favorite song or group is _____.

My favorite food is _____.

I go to school at _____,
and I'm in Grade _____.

I love to learn about _____.

I wish I could be a _____.

The best thing that ever happened to me was
_____.

My best vacation was _____.

Something unique about myself? _____.

Please bring this completed form to your first appointment.... so we can get to know you!