

Salvatore Guerriero, D.M.D., P.C.

Salvatore Colletta, D.M.D.

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www.nashuasmilemakers.com

Patient Information

Patient Name: _____ Date: _____

Male Female

Married

Single

Child

Other

How do you wish to be addressed _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell phone _____

Email _____ Birthdate _____ Social Security Number _____

Family Information

Is another member of your family or relative a patient at our office? Yes No

Name _____ Relationship _____

Whom may we thank for referring you to our office? _____

Person to contact in case of emergency: Name _____

Contact Phone Number _____ Email _____

Responsible Party Information

The following is for the person responsible for payment, if other than patient.

Name _____ Address _____

City _____ State _____ Zip _____ Email _____

Home Phone _____ Work Phone _____ Cell Phone _____

Occupation _____ Employer _____

Employer Address _____

Insurance Information

Primary

Name of Insured _____

Insured's Birthdate _____

Employer _____

Insurance Co. Name _____

Subscriber/Member ID _____

Employee Social Security No _____

Group Number _____

Patient's relationship to insured _____

Secondary

Name of Insured _____

Insured's Birthdate _____

Employer _____

Insurance Co. Name _____

Subscriber/Member ID _____

Employee Social Security No _____

Group Number _____

Patient's relationship to insured _____

I understand that responsibility for payment for Dental Services provided in this office for myself or my dependents is mine.

I authorize the release to insurance companies' any and all information and records, including x-rays, about myself or my dependents or about services rendered or treatment given to me or my dependents that is needed to review, investigate or evaluate any claims for benefits.

I hereby authorize payment of my insurance benefits directly to Salvatore Guerriero, D.M.D., P.C.

I attest to the accuracy of the above information.

SIGNATURE OF RESPONSIBLE PARTY

DATE

Patient

Father

Mother

Guardian