


**Children's Dentistry  
of Morristown**



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We would like to make your child's dental visit with us as pleasant and as fun as possible. Please take a few moments to complete this form and return it to us so that we may work together with you to create a pleasant and informative experience for everyone!

If your child has had a previous dental experience, please tell us about it.

What did you like about your child's last dental experience? What did he/she like about it?

What didn't you like? What didn't he/she like?

If you could have 3 wishes for a dental visit....what would they be?

- 1.
- 2.
- 3.