Dr. Don MacRae D.M.D

4405 3rd Street, Peachland, BC, V0H 1X7
T: 250-767-6411 ext.2 | F: 250-767-6416
www.peachlanddental.com

Peachland dental centre

General Dentistry
Oral Surgery
Pediatric Dentistry
General Anesthetic

Date: _____

Referring Dentist: _____

Referring Office: _____

Office Phone: _____

Office Email: _____

Patient Name: _____ Gender: _____ DOB: _____

Guardian: _____

Address: _____
Street City Postal Code

Cell: _____ Home: _____

---

18 17 16 15 14 13 12 11 21 22 23 24 25 26 27 28

48 47 46 45 44 43 42 41 31 32 33 34 35 36 37 38

---

55 54 53 52 51 61 62 63 64 65

85 84 83 82 81 71 72 73 74 75

Comments:_____

_____

Insurance Information

Insurance Company #1: _____ Insurance Company #2: _____
ID Number: _____ ID Number: _____
Group Number: _____ Group Number: _____
Employer: _____ Employer: _____
Policy Holder: _____ Policy Holder: _____
Policy Holder DOB: _____ Policy Holder DOB: _____

Please send x-rays to: info@peachlanddental.ca
*Hospital privileges at Summerland General Hospital

Peachland

dental centre