



**Somerset  
Dental Associates**  
*Come smile with us!*

1590 North Center Avenue, Suite 102 • Somerset, PA 15501  
865 Eisenhower Boulevard, Complex 2 • Johnstown, PA 15904  
814.444.0850

**PATIENT INFORMATION**

**Patient Full Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Patient Marital Status:** CHILD SINGLE MARRIED DIVORCED WIDOWED

**Patient Race:** \_\_\_\_\_ **Patient Social Security #:** \_\_\_\_\_

**Patient Address:** \_\_\_\_\_  
\_\_\_\_\_

**Patient Phone Numbers:** HOME: \_\_\_\_\_

CELL: \_\_\_\_\_

WORK: \_\_\_\_\_ EXT \_\_\_\_\_

Email Address: \_\_\_\_\_

**IF PATIENT IS UNDER 18 YEARS:**

**Patient Parent/Guardian Full Name:** \_\_\_\_\_

**Parent/Guardian Date of Birth:** \_\_\_\_\_

**Parent/Guardian Address- if different from above:**

\_\_\_\_\_  
\_\_\_\_\_