



**Get Acquainted Questionnaire**  
**Tell Us About Your Child!**

Today's Date \_\_\_\_\_

Child's First Name \_\_\_\_\_ Child's Last Name \_\_\_\_\_ Nickname \_\_\_\_\_ M F

Child's Age \_\_\_\_\_ Child's Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Residence Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Residence Phone \_\_\_\_\_

Email Address \_\_\_\_\_ (for appointment confirmation)

School \_\_\_\_\_ Grade \_\_\_\_\_

Please list any special interest, favorite toys, movies, etc. \_\_\_\_\_

**1. Who is Accompanying the Child Today?**

Name \_\_\_\_\_ Relation \_\_\_\_\_

Do you have legal custody of the child? Yes \_\_\_ No \_\_\_

Parents Marital Status: Single \_\_\_ Married \_\_\_ Widowed \_\_\_ Divorced \_\_\_ Separated \_\_\_

Whom may we thank for referring you? \_\_\_\_\_

**2. Mother's Information**

Stepmother \_\_\_ Guardian \_\_\_

**Father's Information**

Stepfather \_\_\_ Guardian \_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Wk/ Cell # \_\_\_\_\_ Home# \_\_\_\_\_

Wk/ Cell# \_\_\_\_\_ Home# \_\_\_\_\_

SS# \_\_\_\_\_

SS# \_\_\_\_\_

Present Employer \_\_\_\_\_

Present Employer \_\_\_\_\_

**3. Person Responsible for the Account**

Name \_\_\_\_\_ Relation \_\_\_\_\_

Billing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Who is responsible for making appointments?

Name \_\_\_\_\_ Wk # \_\_\_\_\_ Home # \_\_\_\_\_

**4. Insurance Information**

Primary Insurance Company Name \_\_\_\_\_

Insurance Company Phone # \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Group # \_\_\_\_\_

Subscriber ID # (We must have this information to file the claim) \_\_\_\_\_

Policy Owner's Name \_\_\_\_\_ Policy Owner's Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Policy Owner's Employer \_\_\_\_\_

**\* Jenkins and LeBlanc will only file primary insurance. The parent or guardian is responsible for filing secondary insurance claims. Any co-pays or co-insurance rates must be paid at the time services are rendered.**