

# WELLNESS & CHIROPRACTIC CARE

Dear Patient,

Your success with us has not gone unrecognized. The sole reason we are here is to help people achieve their health goals. Since you had such positive results and enjoyed your treatments with us, we were hoping you would do us a favor. I am in the process of putting together a list of testimonials- a collection of comments about the benefits and results of the treatments you have received with us. We believe your experience would be an excellent resource for others who are interested in finding of the benefits of chiropractic healthcare. We are hoping that you would be willing to share your experience with us in writing. In an attempt to make things as quick and easy for you, we have provided four (4) ways to submit your testimonial:

- 1) Email the completed form to Dr. Anita's email: [dra@wellnessandchiropractic.com](mailto:dra@wellnessandchiropractic.com)
- 2) Mail the completed forms to our office 298 Maine Street, Brunswick ME, 04011
- 3) By faxing it to us at (207) 729-7471
- 4) Dropping completed forms off to us 😊

I am very passionate about continuing to help others reach their health goals so they, too, can enjoy life to its fullest!

We look forward to hearing about your overall experience at Wellness and Chiropractic Care.

Thank you for your time!

Kindest Regards,

Anita Knopp, D.C.

**Testimonial Form**

If you do not feel comfortable writing a testimonial in sentence form, we have provided some questions you can answer. Write from your heart 😊

We appreciate you taking the time to fill this out!

1. Why did you seek treatment?
2. What did you enjoy about your treatments?
3. How was your overall experience with the office?
4. Would you recommend us to others?
5. Have these treatments improved your life in any way? (If yes, please explain)
6. Please list any other comments you would like to share.

Dr. Anita Knopp has my permission to use these comments and my name or pseudo name as agreed in this form.

If yes, I give permission to display my name as such:

First name followed by the first initial of last name, ie: John D. (Preferred)

Name:

If no, please tell us how you would like your name to be displayed, i.e. Anonymous, 45-year-old female, wired and tired, etc.

Pseudo name:

Signature:

Date: