

30-SECOND QUESTIONNAIRE: COSMETIC MEDICAL TREATMENTS

Please take a few moments to answer the questions below. We are pleased to offer our valued clients the country's most popular non-surgical aesthetic procedures. Let us know if you would like more information on any of these procedures. Please return to front desk after completing.

Would you be interested in BOTOX® Cosmetic wrinkle removing therapy? Yes ___ No ___

If yes, which facial areas would you be interested in having treated?

Forehead ___ Crow's Feet ___ Frown Lines (between the eyebrows) ___ Other ___

Would you be interested in dermal filler treatments? Yes ___ No ___

If yes, which facial areas would you be interested in having treated?

Smile Lines ___ Vertical Lip Lines ___ Lip Borders ___ Under Eyes ___ Cheeks ___ Other ___

Would you be interested in receiving facial rejuvenation treatments? Yes ___ No ___

If yes, which conditions are you interested in having treated?

Age Spots ___ Rosacea ___ Broken Capillaries ___ Fine Lines & Wrinkles ___ Enlarged Pores ___ Sagging Skin ___ Texture ___ Tone ___ Scars/Acne Scars ___ Loss of Volume ___ Other ___

Would you be interested in Laser Hair Removal? Yes ___ No ___

If yes, which areas would you be interested in having treated?

Face ___ Underarms ___ Bikini Line ___ Legs ___ Arms ___ Back ___ Chest ___ Other ___

Would you be interested in non-invasive body sculpting to tone, tighten, and eliminate unwanted body fat? Yes ___ No ___

Would you be interested in removing an unwanted tattoo? Or are you planning on re-inking over a current tattoo? Yes ___ No ___

Would you be interested in a FREE Skin Care Consultation? Yes ___ No ___



Yes! Please contact me with new information on cosmetic procedures, products and specials.

Name _____

Cell Phone: _____

Email: _____

Signature: _____