

Welcome to STOUT WELLNESS CENTER

“Serving the Tri-State Area Since 1994”

On behalf of our Clinic Director, Dr. Allen Stout, DC, RN
and our Medical Director, Dr. Terry L. Coyle, DC, MSN, FNP-C
We welcome you to the clinic.

Please take a moment to tell us about yourself and how you heard about our clinic.

Name: _____ Today's Date: _____

Your appointment today is with: _____ Dr. Stout _____ Dr. Coyle

<p>_____ Patient Referral</p> <p>_____ Physician's Referral</p> <p>_____ Attorney's Referral</p> <p>_____ Staff's Referral</p> <p>_____ Insurance Provider</p> <p>_____ Yellow Pages</p> <p>_____ Website/www.stoutwellness.com</p> <p>_____ Dr. Stout's Facebook Page</p> <p>_____ Dr. Coyle's Facebook Page</p> <p>_____ Clinic's Large Billboard Signage</p> <p>_____ Health Event Booth</p> <p>_____ Mohave Valley Daily News Ad/Website</p> <p>_____ "Our Town" Magazine Ad</p> <p>_____ Civic Group/Organization/Church Member</p> <p>_____ Mohave Electric Coop</p> <p>_____ Bullhead City Chamber of Commerce</p> <p>_____ Yelp.com</p> <p>_____ Google Search</p> <p>_____ Gift Certificate</p>	<p>Patient Who Referred: _____</p> <p>Doctor's Name: _____</p> <p>Attorney's Name: _____</p> <p>Staff Member's Name: _____</p> <p>Insurance Company: _____</p> <p>Which Event: _____</p>
--	---

Sex: _____ Male _____ Female

Age range: _____ 12-20 _____ 21-30 _____ 31-40 _____ 41-50 _____ 51-64 _____ 65-80 _____ 81+

Are you a "Snowbird" to the Tri-State area? Yes _____ No _____