

# OLYMPIC ORTHODONTIC LABORATORY, INC.

17280 Woodinville-Redmond Road N.E., Suite 805 • Woodinville, WA 98072  
(425) 806-9194 • 1 (800) 494-0300

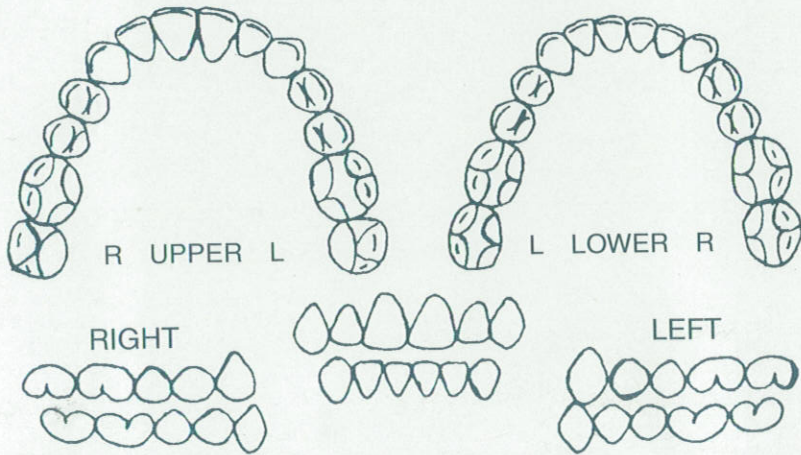
Date Shipped \_\_\_\_\_  
Date Required \_\_\_\_\_  
Time \_\_\_\_\_ AM PM

Doctor \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Patient's Name (Please Print) \_\_\_\_\_

FOR OLYMPIC ORTHODONTIC LAB USE ONLY

ALL APPLIANCES ARE GUARANTEED TO FIT ORIGINAL MODELS.  
TO ENSURE WARRANTY, PLEASE RETAIN MODELS UNTIL APPLIANCE IS SEATED.

DESIGN CASE HERE



Acrylic:  Pinktone  Clear  Other \_\_\_\_\_

Type of clasp \_\_\_\_\_

Special Instructions \_\_\_\_\_

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

Doctor's Signature \_\_\_\_\_ License # \_\_\_\_\_

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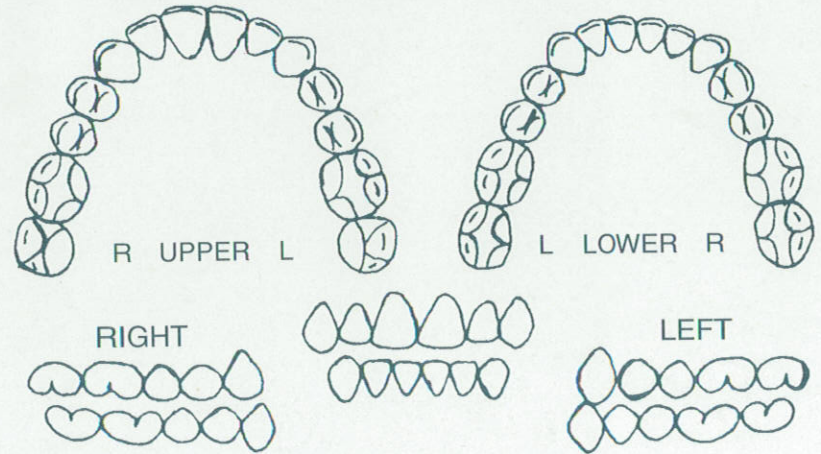
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From \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ ZIP CODE

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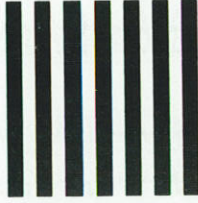
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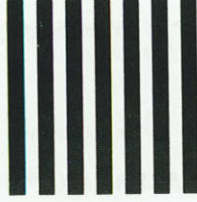
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