



## My Chiropractic Story

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You can help others discover chiropractic! Now that you have been helped by chiropractic, don't you wish everyone knew about this drugless, non-surgical, natural way to health? Undoubtedly you have one or more relatives or friends to thank for telling you about this great service. Now you can share your story of better health through chiropractic.

All you need to do is write in your own words, in the spaces provided, your chiropractic story. Use the instructions and questions provided as a guide. When you return this signed statement, we will take a photo (or snapshot) and attach it to your story.

There are so many people who are not aware of the benefits of chiropractic treatment. Won't you help us tell others about the wonders of better health through chiropractic? Please share your story. Thank You.

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*Please answer all the questions as completely as possible; if more space is needed, attach a blank sheet of paper.*

**1. Describe the condition for which you consulted your chiropractor:**

- a. If you know the name of your problem or disorder, please list it here.

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- b. What symptoms did you have?

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- c. What was the location of your pain?

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- d. What was the duration and the severity of your pain?

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**2. Describe any previous treatment and the results of that treatment.**

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**3. Tell what drugs and/or medications you were taking, if any, and if you feared addiction.**

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**4. What led to your decision to try chiropractic?**

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**5. Had you previously been to a chiropractor?**

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**6. Did you have any doubts that chiropractic care would help you?**

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7. What were your first impressions of chiropractic, this office, and the doctor?

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8. What recommendations were made by the chiropractor?

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9. Describe your results, including time involved.

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10. Is anyone else in your family a chiropractic patient? If so, for what condition(s)?

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11. How has chiropractic helped them?

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12. What would you recommend to others who are sick, suffering, or in pain?

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13. How many others have you told about chiropractic?

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14. How do you feel about chiropractic, now that you have enjoyed its benefits?

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**I hereby give permission for all or any part of the above statements to be reproduced with or without my name and photograph, for the purpose of telling others about the benefits of chiropractic care.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*On behalf of Lake Cities Chiropractic, we would like to thank you for taking your time to fill out this questionnaire.*