



1300 S. Dickinson Drive

Leland, NC 28451

Office: (910)383-2615

Fax: (910) 383-2618

kelly@bluewavedentistry.com

Terra@bluewavedentistry.com

Requesting records from: _____

Address : _____

Phone/Fax: _____

Please release all current x-rays to our office for patient listed below Thank You!

Patient Name: _____

DOB: _____

Patient Signature: _____