

Dear Friend and Patient,

Thank you for taking the time and showing interest in telling others about how chiropractic care has helped you. We are providing you with a few guidelines to help you write your testimonial. Please print or type on a separate sheet of paper the history and details of your chiropractic experience, including the following:

1. The problems, symptoms, or ailments you were troubled with prior to chiropractic care.
2. The number of weeks, months, or years you had these problems.
3. The number and type of doctors, and drugs taken.
4. The extent to which your normal life was interrupted due to your health problems.
5. The changes noticed with chiropractic treatment, and specific treatment that seemed to help the most. How these treatments have changed your everyday life.

Your testimonial will be displaced in the lobby of our office. We feel that it will be a helpful tool teaching others about the benefits of chiropractic care and will hopefully lead to more people being able to benefit from this care. Please sign the bottom of this form and return it along with your testimonial as soon as possible.

With much appreciation,

Dr. Daryl G. Kowalik

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I, \_\_\_\_\_, hereby give permission to Daryl G. Kowalik, D.C. to use my testimonial to further educate others about chiropractic. I understand that it will be used to encourage others whose health problems may be similar to my own to seek chiropractic care.

\_\_\_\_\_ Date \_\_\_\_\_

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