



Studio32 Dental Arts LLC
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 Amarillo, TX 79109
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 806-437-0555

Date _____

Doctor _____ Phone _____

Address _____

City _____ State _____

Patient Name _____ Age _____ [] Male [] Female

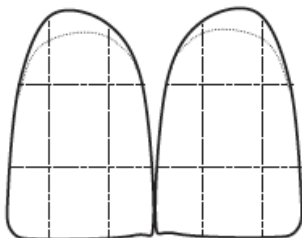
Return Date _____ [] Try In [] Finish

All Ceramic: [] Zirconia [] Emax [] Empress [] BruxZir

Metal: [] Full Cov. [] Gold [] Semi Precious [] Non Precious

CROWN DESIGN

Characterizations



Shade _____

Pontic Design



*Standard design if an option is not selected.

Stump Shade _____
 (required for Empress/e.max)

If Insufficient Room

- Trim opposing*
- Reduction coping
- Metal occlusal
- Metal island

Occlusal Clearance

- Light*
- Open
- Tight

Contact

- Light*
- Medium
- Heavy

Complete Instructions _____

Dentist's Signature _____ License # _____