

# MEET & GREET WITH DR. GROVER

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_ (Email will not be given to others)

DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex: F M Non-Binary Today's Date: \_\_\_\_\_

Please remember that this is simply a meet and greet that is scheduled for 30 minutes and not a regular office visit. If you would like to make it a regular visit for medical advice, please let us know, and we can change the appointment type. No exam or prescriptions will be made with this type of visit. However, if you would like to discuss Dr. Grover expertise in addressing specific health concerns, please list below.

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

Do you have any other questions on Dr. Grover's philosophy, expertise, or the Advanced Wellness Annual Program that we can answer for you?

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

We hope we are a good fit for you and can address your needs in the future. If you would like to join the practice, you will need to join our Advanced Wellness Program today or at the upcoming initial medical visit appointment. Please review the benefits of this program with our front desk staff, the welcome packet and discuss it with Dr. Grover, too, if needed. Please complete our registration form and the AWP agreement if joining the practice.

Thank you for coming in!

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Fred Grover Jr. M.D. and RevolutionaryMD team