

MINT.



dental studio

Patient Info:

Patient Name _____

Date _____

Guardian / POA (if applicable) _____

Patient Birthdate _____

Phone (primary) _____

Referring Provider _____

Phone (alternate) _____

Provider Contact # or Email _____

Additional Comments or Concerns:

Our Location

40 E Mendenhall St,
Bozeman, Mt 59715

Mint* Philosophy

Why We Do It

Our goal is to provide patients of all ages a refreshing dental experience through tailored and conservative treatment in a relaxed & comfortable environment.

Contact Info

Studio Hours: M-F 7:30am-5pm

Extended Hours: Monday & Thursday until 8pm

Fax: 406-586-5881

Phone: 406-586-5880

Email: info@refreshingdentistry.com

Thank you for your referral!

