

# Wanted- Your Chiropractic Success Story

We would love to hear how chiropractic care has impacted your health and your life. A brief story written or typed would be appreciated or you may simply fill out the questionnaire below.

Your Name: Angela Thompson  
Child's Name (if applicable): \_\_\_\_\_ Age: 35

The reason you or your child began Chiropractic care: migraine headaches at the age of 11.

Length of condition(s), severity and effect this had upon your family: Approx. 1 to 2 years of different tests, missed school and suffering until a neighbor suggested a chiropractor.

Past treatments, medications and effects: Saw 2 neurologists, tried several medications from regular M.D. Eventually they thought it was hereditary. (grampa had migraines)

How your life or your child's life/health has improved with Chiropractic care: 100% relief from migraines without any medication

This information is accurate to the best of my knowledge. I give you permission to share my story with others in order to positively change their lives also!

Signature: Angela Thompson Date: 1/22/07