Are you interested in contact lenses?

Answer these questions to help us decide what type of contact lens would be most suitable for you.

Have you worn contact lenses before? Yes No
If yes, why did you stop wearing them?
What type of lenses have you tried?
Daily Reusable Extended wear Not sure
Do you want to wear contact lenses every day or just occasionally?
Do you want to be able to sleep in your lenses?
Yes No Not sure
What do you currently wear glasses for?
Reading Distance Both
What sport or exercise activities do you participate in regularly?
What are your hobbies?
Do you use a computer as part of your job?
Yes No
Do you suffer from dry, tired eyes towards the end of the day?
Yes No
Do you suffer from any seasonal allergies? Please specify
bo you surrer from any seasonal anergies: Flease specify



