

Client Name: _____



APPOINTMENT REMINDER PREFERENCE

How would you like to receive reminders for your appointment? Please check one and provide your preferred phone number:

Phone call: _____

Text message: _____

We cannot guarantee confidentiality when communicating with you via cell phone, cordless phone, fax, email, or computer. These devices could compromise confidentiality. By understanding the inherent risks of the aforementioned devices, you can make an informed choice about where, when, and how to use these tools. A client signature is required to proceed with the request to receive confirmation for appointments and other information. You are acknowledging this is a private method of communication to protect your confidentiality.

Client signature: _____ Date: _____