



Engineered Smiles

Agreement to Receive Electronic Communication

Due to the changing world of healthcare and technology, we now have the ability to efficiently provide our patients with certain types of information via e-mail and/or text messaging.

We believe strongly in protecting the privacy of our patients. When you provide this information to us, it is only used as a way to communicate with you. In order to protect your privacy, no confidential or personal information will be sent from us via email or text messaging. We do not share the names, e-mail addresses, and/or telephone numbers of patients with any other companies, or with any other patient.

I acknowledge that I have read and understand the above statement on emails and text messages. Should I have any questions, I can contact the practice at any time. I hereby give permission to send messages to me via email and/or text messaging as means of communication.

I am aware there is some level of risk that a third party may intercept and read unencrypted emails.

Patient Name (Please Print)

Signature (Patient or Authorized Representative)

Date

Email Address (PLEASE PRINT CLEARLY):

Cell Phone Number:
