

# Privacy Consent

Please check **all options** that are available ways to contact you.

## Open Correspondence:

- Reminder Cards** (reminders for hygiene appointments)  
 **Recall/Activation Cards** (to notify you that you're overdue for a checkup)  
 **E-mail** \_\_\_\_\_

## Phone Calls:

### Leaving Messages:

- On answering machine/voicemail at home**  
 **With spouse/parent/child at home**  
 **Voicemail at work**  
 **Secretary/Co-Worker**  
 **Voicemail on cell phone/pager** \_\_\_\_\_

## Person(s) we are able to release information to:

\_\_\_\_\_  
Name Relationship Home/Work Numbers

\_\_\_\_\_  
Name Relationship Home/Work Numbers

\_\_\_\_\_  
Name Relationship Home/Work Numbers

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date

**\*All changes in this information must be made in writing.**