

PRIME DENTAL CARE - USA

Communication & Contact - Consent Form

Prime Dental Care USA may wish to contact you for several reasons including but not limited to: setting up appointment, confirming appointment, following up after procedures, discussing financial matters, discussing insurance matters, referrals, current or future promotions.

Prime Dental Care USA uses several methods of communications including but not limited to: In person, Phone calls, Text Messages, Emails, Mail, other types of social media.....etc

Please Check your preferred method of contact:

_____ I consent to receive electronic communication by emails

_____ I consent to receive electronic communication by text message.

_____ I wish to be contacted by phone only.

You can always change or withdraw your consent at any time by phone or in writing.

Prime Dental Care USA will not disclose or share any of your information to anyone or 3rd party without your written signed release.

As with Any form of communication, there are some risks that any Personal health information [PHI] and other sensitive or confidential information that may be leaked, misdirected, disclosed to or intercepted by unauthorized third parties.

Patient name or legal Guardian: _____

Signature: _____

Date: _____