



Tree of Life Counseling Services, LLC
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Communication by Email or Text Consent Form

Email and text messaging allows health care providers to exchange information efficiently for the benefit of our patients. At the same time, we recognize that email and text messaging are not a completely secure means of communication because these messages can be addressed to the wrong person or accessed improperly while in storage or during transmission. If you would like us to send you email and/or text messages that contains your health information, please complete and sign this Consent below. You are not required to authorize the use of email and/or text messaging and a decision not to sign this authorization will not affect your health care in any way. If you prefer not to authorize the use of email and/or text messaging we will continue to use U.S. Mail or telephone to communicate with you.

Text and email should not be used for therapeutic purposes and in the case of an emergency call 911.

NAME (printed) _____

DOB _____ DATE _____

EMAIL _____

CELL PHONE _____

SIGNATURE _____

PREFERRED (check one) Email Text