



CONSENT FORM FOR TEXT MESSAGING REMINDERS

**I give permission consent to receive text messages from Practice Makes Perfect, LLC
or others
acting on Practice Makes Perfect, LLC's behalf. As part of this consent, You represent
and warrant the
following:**

- (1) Practice Makes Perfect, LLC or others acting on their behalf may send text messages in various formats and with various contents, including but not limited to, text messages about appointment reminders.
- (2) You are the owner or authorized user of the mobile phone number identified below. You will notify us immediately if you are no longer the owner or authorized user of the mobile phone number identified below.
- (3) You are solely responsible for any message and data charges associated with such text messages.

If You do not wish to receive text messages from the Practice Makes Perfect, LLC or others acting on their behalf, You should not sign this form, or agree to this statement on our registration form.

Printed Name _____

Date of Birth _____

Signature _____

Mobile Phone Number _____