

**Leigh Family &
Cosmetic Dentistry**

330 West Tienken Road – Suite A
Rochester Hills, MI 48306

OPTIONAL - RECEIVE APPOINTMENT REMINDERS VIA EMAIL

Leigh Family & Cosmetic Dentistry e-mail Consent:

I am an established patient of Leigh Family & Cosmetic Dentistry. I wish to participate in receiving appointment confirmations via e-mail. I understand that this email will not be entirely secure / private, although Leigh Family & Cosmetic Dentistry will take every precaution to protect privacy. I understand that my e-mail correspondence may be printed and placed in my medical records for documentation purposes.

Print Name: _____

Email address: _____@_____

Signature: _____ Date: _____