

Zahler and Henke, PC
Prosthodontics & Implantology

Patient Communication Preferences

To Our Valued Patients:

We are updating our records to determine the best way to communicate with you regarding treatment and appointments in our practice, as well as information regarding your dental health.

Please let us know your preferred method for receiving messages from us:

Cell Phone, please provide number: _____

Home Phone, please provide number: _____

Work Phone, please provide number: _____

E-mail. Please provide address: _____

In the event you cannot be reached by phone, is there someone we may leave a message with? (E.g. spouse, partner) Name(s): _____

May we send e-mail messages to you regarding you appointments? Yes No

If you have any additional requests regarding your communication preferences, please feel free to list them below:

Name (Please Print)

Signature

Date