

EZ DENTAL

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We provide our patients the option to participate in our online patient communication system. Some of the features include the ability to:

- Request Appointments Online
- Confirm Appointments via Email
- Receive Text Message Appointment Reminders
- Submit Patient Satisfaction Surveys
- Refer Your Friends Online

You may opt-out of communications at any time by clicking the unsubscribe link in the footer of each email or by replying to a text message with "STOP". Standard Text messaging rates apply.

Please Verify Your Contact Information
Current information on File: Corrections, if any:

Name _____
Address _____
City _____
State _____
Zip _____
Home Phone _____
Cell Phone _____

Email _____ **Check here to Opt in to Text Messages**
_____ **Check here to opt in to Email**

We use this information to provide you with excellent treatment. We may disclose Patient Health information (PHI) to third parties that perform services for EZ Dental in the administration of your benefits in accordance with HIPPA. These parties are required by law to sign a contract agreeing to protect the confidentiality of your PHI. Your PHI may be disclosed to an affiliate that performs services for EZ Dental in the administration of your benefits. Our affiliates do not sell, share or rent our users personally identifiable information unless required by law, do not send any e-mail or other communications without user permission, and do not send Spam.

Please sign below that you agree to us to use this information in providing your services.

Signature

Date