



*Don't neglect your health, reform it*

## Appointment Reminder Consent:

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Guarantor Name (if Guarantor is not Self): \_\_\_\_\_

**Complete this form and sign below to give your permission for Reform Physical Therapy to provide automatic appointment reminder by email or by cell phone text message.**

**Step One:** Select ONE option below

Reform Physical Therapy may send email messages to  
confirm my upcoming appointments to: \_\_\_\_\_

Reform Physical Therapy may send cell phone text messages to confirm my upcoming  
appointments to: \_\_\_\_\_

**Step Two:** If you would like text message reminders, please indicate your cell phone carrier:

- AT&T
- Cingular
- Sprint
- T-Mobile
- US Cellular
- Verizon
- Virgin Mobile
- Other: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_