



RAVENEL PERIODONTICS, PA
Dr. Lisa Ravenel
1130 E Butler Rd
Greenville, SC 29607

Agreement to Receive Electronic Communication

Patient Name: _____ Date of Birth: _____

Please select one for the following:

I DO AGREE I DO NOT AGREE

That Ravenel Periodontics, PA may communicate with me electronically at the email address and/or mobile phone number listed below.

My most preferred method of electronic communication: (Select all that apply)

- Text Messaging
- Email – Best Email Address: _____
- Phone Call – Best Number to contact: _____

Do you give permission to leave a message regarding appointments or finances? YES NO
 None

I would like to receive:

- Appointment Reminders/Recall Visits
- Information regarding insurance/billing

I can withdraw my consent to electronic communications at any time by calling:

Ravenel Periodontics, PA
Phone: 864.626.4777
Email: info@ravenelperio.com

Patient/Guardian Signature: _____ Date: _____

Witness Signature: _____ Date: _____