

Consent to Email or Text for Appointment Reminders and Other Healthcare Communications



As a patient at Discover Vision Centers, I consent to receiving appointment reminders, feedback on my experience with my healthcare team and general health reminders/information via email or text.

I consent to receive text and/or email messages from Discover Vision Centers. I understand that this request to receive emails and text messages will apply to all future appointment reminders/feedback/health information unless I request a change in writing. The notifications mentioned on this consent will be sent to the following:

Mobile Phone Number:

I authorize to receive email/text messages for appointment reminders and general health reminders/feedback/information in the Patient Portal to the following Email Address:

Discover Vision Centers does not charge for this service, but standard text messaging rates may apply as provided in your wireless plan. Contact your carrier for pricing plans/details.

Signature:

Printed Name:

Date: